

Health insurance

Plan comparison form

If you're shopping for health insurance, use this form to compare health insurance plans.

I. Plan costs

		Plan 1:	Plan 2:
Monthly premium amount		\$_____ per Month	\$_____ per Month
How much is the annual deductible?	Hospital visits:	\$_____ per year	\$_____ per year
	Medical care:	\$_____ per year	\$_____ per year
	Prescriptions:	\$_____ per year	\$_____ per year
	Total:	\$_____	\$_____
How much is your copay or coinsurance?	Office visits:	\$_____ per visit	\$_____ per visit
	Hospital visits:	\$_____ per stay	\$_____ per stay
	Prescriptions:	\$_____ per Rx fill	\$_____ per Rx fill
	Total yearly estimated costs:	\$_____	\$_____
Prescription drug costs	Are prescriptions covered?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Does the plan cover my prescription? (Find out by checking online or by calling the company)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	My total yearly estimated costs:	\$_____	\$_____
	What is the yearly limit on my out-of-pocket costs? (Does it include the deductible?)	\$_____	\$_____

2. Things to consider

Do I have to take a health questionnaire to get the plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do ALL my providers (doctors, hospitals, specialists, pharmacies, etc.) take this plan? (Look on the company's website or call)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do I need referrals for specialists?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does this plan accept provider billing or do I have to pay upfront and get the plan to reimburse me?	<input type="checkbox"/> Accept <input type="checkbox"/> Pay up front	<input type="checkbox"/> Accept <input type="checkbox"/> Pay up front
If I have a pre-existing condition, how long will I have to wait for coverage?		

3. Coverage

<p>This plan covers these services (Covered services) that are important to me:</p> <p>Note: Include coverage for any family members. Check for services you and your family use now or plan to use, including prescriptions, maternity, etc.</p>		
<p>This plan does NOT cover these services (Excluded services) that are important to me:</p> <p>Note: Include coverage for any family members. Check for services you and your family use now or plan to use, including prescriptions, maternity, etc.</p>		

3. Coverage (continued)

Are there limits on the number of visits for types of care?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
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4. Other considerations

If I travel, does this plan cover care outside my local area?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does this plan coordinate benefits with other health plans?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is this insurance plan authorized to do business in Washington state? (To find out, go to: http://www.insurance.wa.gov/consumertoolkit/search.aspx or call the Insurance Consumer Hotline at 1-800-562-6900)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the company have a high number of consumer complaints? (To find out, go to https://fortress.wa.gov/oic/complaints/ or call the Insurance Consumer Hotline at 1-800-562-6900)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
*For Medicare clients only Is the plan's drug coverage as good as Medicare Part D? (Check one)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A - Plan is Part D or Medicare Advantage and includes Part D	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A - Plan is Part D or Medicare Advantage and includes Part D

* To compare two or more Medicare Advantage plans or two or more Medicare Part D plans, or to get information about comparing a Part D plan with your current health care plan, go to: www.medicare.gov/

Questions?

Call our Insurance Consumer Hotline at

1-800-562-6900

www.insurance.wa.gov

5. Your notes

Statewide Health Insurance Benefits Advisors (SHIBA) is a free, unbiased service of the:



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