

## HSA MODELER

Below are scenarios designed to help you compare the Self-Directed Health Plan (SDHP) with a Health Savings Account (HSA) to one of the other traditional health plans (EPO or PPO). By using an SDHP/HSA solution, you can often realize significant savings on your insurance premiums and receive a deduction on your income taxes, as well as save money for future medical expenses.

There are numerous HSA calculators available on the internet. CITGO does not maintain these calculators or warrant the results. However, you may wish to utilize one of them as an additional resource:

[http://www.aarp.org/health/medicare-insurance/hsa\\_calculator/](http://www.aarp.org/health/medicare-insurance/hsa_calculator/)

<http://www.hsacenter.com/plan-comparison-calculator.html>

<https://www.blackhawkbank.com/hsa-calculator.htm>

<https://mybancorphsa.mybankingservices.com/Bancorp/Resources/calculators/HSAvsTraditional.aspx>

### Scenario 1 – No claims filed

Employee only coverage

FSA contribution (EPO, PPO):	\$2500 (maximum)
HSA contribution (SDHP plan):	\$2500 (maximum, assuming receipt of maximum Healthy Rewards Incentives)
Healthy Rewards Incentive from CITGO:	\$800 (maximum)

<b>FIXED AMOUNTS</b>	<b>EPO</b>	<b>PPO</b>	<b>SDHP</b>
Annual Cost of each Plan:	\$1,596.00	\$1,320.00	\$120.00
Monthly Cost of each Plan:	\$133.00	\$110.00	\$10.00
Total Flexible Spending Account Contribution based on scenario:	\$2,500.00	\$2,500.00	N/A
Total Health Savings Account Contribution based on scenario:	N/A	N/A	\$2,500
Total Monthly Employee Cost (premiums + FSA/HSA contribution):	\$341.33	\$318.33	\$218.33

<b>SAMPLE SCENARIO 1 - NO CLAIMS FILED</b>	<b>EPO</b>	<b>PPO/In NetWk</b>	<b>SDHP</b>
<i>Consider what expenses might be if no claims are filed.</i>			
Medical Premium Contributions paid by you by Plan:	\$1,596.00	\$1,320.00	\$120.00
Healthy Rewards Incentives received from CITGO (maximum amount assumed):	\$150.00	\$250.00	\$800.00
Contribution to FSA or HSA based on scenario:	\$2,500.00	\$2,500.00	\$2,500.00
<b>Total Employee Expenses per year (premiums + FSA/HSA contribution – incentives received):</b>	\$3,946.00	\$3,570.00	\$1,820.00
<b>Estimated Remaining Balance of FSA or HSA at year end*:</b>	\$0.00	\$0.00	\$3,300.00

\*If there is a remaining balance in the FSA at the end of the year, you will lose it unless you use it in that year for other qualified expenses such as prescriptions, dental or vision. The HSA balance rolls over to the next year and is available for payment of qualified medical expenses in future years.

## Scenario 2 – No claims filed

Employee and spouse coverage

FSA contribution (EPO, PPO): \$2500 (maximum)

HSA contribution (SDHP plan): \$4950 (maximum, assuming receipt of maximum Healthy Rewards Incentives)

Healthy Rewards Incentive from CITGO: \$1600 (maximum)

<b>FIXED AMOUNTS</b>	<b>EPO</b>	<b>PPO</b>	<b>SDHP</b>
Annual Cost of each Plan:	\$3,108.00	\$2,568.00	\$240.00
Monthly Cost of each Plan:	\$259.00	\$214.00	\$20.00
Total Flexible Spending Account Contribution based on scenario:	\$2,500.00	\$2,500.00	N/A
Total Health Savings Account Contribution based on scenario:	N/A	N/A	\$4,950.00
Total Monthly Employee Cost (premiums + FSA/HSA contribution):	\$467.33	\$422.33	\$432.50

<b>SAMPLE SCENARIO 2 - NO CLAIMS FILED</b>	<b>EPO</b>	<b>PPO/In NetWk</b>	<b>SDHP</b>
<i>Consider what expenses might be if no claims are filed.</i>			
Medical Premium Contributions paid by you by Plan:	\$3,108.00	\$2,568.00	\$240.00
Healthy Rewards Incentives received from CITGO (maximum amount assumed):	\$300.00	\$500.00	\$1,600.00
Contribution to FSA or HSA based on scenario:	\$2,500.00	\$2,500.00	\$4,950.00
<b>Total Employee Expenses per year (premiums + FSA/HSA contribution – incentives received):</b>	\$5,308.00	\$4,568.00	\$3,590.00
<b>Estimated Remaining Balance of FSA or HSA at end of year*:</b>	\$0.00	\$0.00	\$6,550.00

\*If there is a remaining balance in the FSA at the end of the year, you will lose it unless you use it in that year for other qualified expenses such as prescriptions, dental or vision. The HSA balance rolls over to the next year and is available for payment of qualified medical expenses in future years.

### Scenario 3 – \$5,000 Medical Claim incurred

Employee and children coverage

FSA contribution (EPO, PPO): \$2500 (maximum)

HSA contribution (SDHP plan): \$5750 (maximum, assuming receipt of maximum Healthy Rewards Incentives)

Healthy Rewards Incentive from CITGO: \$800 (maximum)

<b>FIXED AMOUNTS</b>	<b>EPO</b>	<b>PPO</b>	<b>SDHP</b>
Annual Cost of each Plan:	\$2,376.00	\$1,968.00	\$180.00
Monthly Cost of each Plan:	\$198.00	\$164.00	\$15.00
Total Flexible Spending Account Contribution based on scenario:	\$2,500.00	\$2,500.00	N/A
Total Health Savings Account Contribution based on scenario:	N/A	N/A	\$4,590.00
Total Monthly Employee Cost (premiums + FSA/HSA contribution):	\$406.33	\$372.33	\$427.50

<b>SAMPLE SCENARIO 3 - \$5,000 CLAIM FILED</b>	<b>EPO</b>	<b>PPO/In NetWk</b>	<b>SDHP</b>
<i>Consider what expenses might be if using in-network services and incurred medical claims of \$5,000</i>			
Medical Premium Contributions paid by you by Plan:	\$2,376.00	\$1,968.00	\$180.00
Healthy Rewards Incentives received from CITGO (maximum amount assumed):	\$150.00	\$250.00	\$800.00
Contribution to FSA or HSA based on scenario:	\$2,500.00	\$2,500.00	\$5,750.00
Medical Expenses Incurred (assuming \$5,000 claim and 10% for EPO, 20% for PPO and SDHP plus deductible)	\$500.00	\$1,840.00	\$3,400.00
<b>Total Employee Expenses per year (premiums + FSA/HSA contribution – incentives received):</b>	<b>\$4,726.00</b>	<b>\$4,218.00</b>	<b>\$5,930.00</b>
<b>Estimated Remaining Balance of FSA or HSA for other claims during the year or roll-over*:</b>	<b>\$2,150.00</b>	<b>\$910.00</b>	<b>\$3,150.00</b>

\*If there is a remaining balance in the FSA at the end of the year, you will lose it unless you use it in that year for other qualified expenses such as prescriptions, dental or vision. The HSA balance rolls over to the next year and is available for payment of qualified medical expenses in future years.

## Scenario 4 – \$50,000 Medical Claim incurred

Employee only coverage

FSA contribution (EPO, PPO): \$2500 (maximum)

HSA contribution (SDHP plan): \$2500 (maximum, assuming receipt of maximum Healthy Rewards Incentives)

Healthy Rewards Incentive from CITGO: \$800 (maximum)

<b>FIXED AMOUNTS</b>	<b>EPO</b>	<b>PPO</b>	<b>SDHP</b>
Annual Cost of each Plan:	\$1,596.00	\$1,320.00	\$120.00
Monthly Cost of each Plan:	\$133.00	\$110.00	\$10.00
Total Flexible Spending Account Contribution based on scenario:	\$2,500.00	\$2,500.00	N/A
Total Health Savings Account Contribution based on scenario:	N/A	N/A	\$2,500.00
Total Monthly Employee Cost (premiums + FSA/HSA contribution):	\$341.33	\$318.33	\$218.33

### **SAMPLE SCENARIO 4 - \$50,000 CLAIMS FILED**

**EPO                      PPO/In NetWk                      SDHP**

*Consider what expenses might be if your total out-of-pocket is reached using in-network services. Ex: \$50,000 of medical expenses incurred.*

Medical Premium Contributions paid by you by Plan:	\$1,596.00	\$1,320.00	\$120.00
Healthy Rewards Incentives received from CITGO (maximum amount assumed):	\$150.00	\$250.00	\$800.00
Contribution to FSA or HSA based on scenario:	\$2,500.00	\$2,500.00	\$2,500.00
Medical Expenses Incurred (assuming \$5,000 claim and 10% for EPO, 20% for PPO and SDHP plus deductible)	\$5,000.00	\$4,350.00	\$4,000.00
<b>Total Employee Expenses (premiums + FSA/HSA contribution – incentives received):</b>	<b>\$6,446.00</b>	<b>\$5,420.00</b>	<b>\$3,320.00</b>
<b>Estimated Remaining Balance of FSA or HSA:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

### Scenario 5 – No claims filed

Employee + family coverage

FSA contribution (EPO, PPO):	\$0
HSA contribution (SDHP plan):	\$4950 (maximum, assuming receipt of maximum Healthy Rewards Incentives)
Healthy Rewards Incentive from CITGO:	\$1600 (maximum)

#### FIXED AMOUNTS

	EPO	PPO	SDHP
Annual Cost of each Plan:	\$4,224.00	\$3,480.00	\$312.00
Monthly Cost of each Plan:	\$352.00	\$290.00	\$26.00
Total Flexible Spending Account Contribution based on scenario:	\$0	\$0	N/A
Total Health Savings Account Contribution based on scenario:	N/A	N/A	\$4,950.00
Total Monthly Employee Cost (premiums + FSA/HSA contribution):	\$560.33	\$498.33	\$438.50

#### SAMPLE SCENARIO 5 - NO CLAIMS FILED

*Consider what expenses might be if no claims are filed.*

	EPO	PPO/In NetWk	SDHP
Medical Premium Contributions paid by you by Plan:	\$4,224.00	\$3,480.00	\$312.00
Healthy Rewards Incentives received from CITGO (maximum amount assumed):	\$300.00	\$500.00	\$1,600.00
Contribution to FSA or HSA based on scenario:	\$0	\$0	\$4,950.00
<b>Total Employee Expenses (premiums + FSA/HSA contribution – incentives received):</b>	\$3,924.00	\$2,980.00	\$3,662.00
<b>Estimated Remaining Balance of FSA or HSA*:</b>	\$0.00	\$0.00	\$6,550.00

\*If there is a remaining balance in the FSA at the end of the year, you will lose it unless you use it in that year for other qualified expenses such as prescriptions, dental or vision. The HSA balance rolls over to the next year and is available for payment of qualified medical expenses in future years.