



## TEXAS HEALTH INSURANCE PLAN COMPARISON WORKSHEET

Use this worksheet to compare health insurance plans side-by-side. Use additional copies of the form if needed for additional quotes.

**INSTRUCTIONS:**

- Household consists of the individual and all persons whom the individual lists as a tax dependent.
- The income you expect to receive during the year for which you are obtaining coverage.
- List all prescriptions that need to be covered by your health insurance policy. (Note: If it's not covered but you require it - your agent may be able to negotiate the coverage into the plan)

<b>Household Size:</b>
<b>Annual Projected Income:</b>
<b>Your Required Prescriptions:</b>

## HEALTH INSURANCE QUOTE COMPARISON

Fill in all available information to track the key points about the plans.

INSURANCE COMPANY NAME	Company (A)	Company (B)	Company (C)
Insurance Plan Name			
METAL TIER (Bronze, Silver, Gold, Platinum)			
PLAN TYPE (HMO, PPO, EPO, etc.)			
Monthly PREMIUM (full price)	\$	\$	\$
Monthly PREMIUM (after tax credits and subsidies based on income)	\$	\$	\$
ANNUAL PREMIUM (after all subsidies based on income)	\$	\$	\$

### COST SHARING

Costs that you are expected to pay out of pocket, in addition to the monthly premium, such as: deductible, copayment, and coinsurance.

Specific amount (\$) or percentage (%).

**DEDUCTIBLE & OUT-OF-POCKET**

	Company (A)	Company (B)	Company (C)
Deductible (in-network)			
Deductible (out-of-network)			
Maximum Out-of-Pocket (Individual)			
Maximum Out-of-Pocket (Family)			

**DOCTOR VISIT**

	Company (A)	Company (B)	Company (C)
Primary Care Visit (PCP in-network)			
Primary Care Visit (PCP out-of-network)			
Specialist Visit (in-network)			
Specialist Visit (out-of-network)			
Emergency Room Visit (before coinsurance)			
Inpatient Hospital Stay			
Preventive Care / Screening / Immunization (in-network)			
Preventive Care / Screening / Immunization (out-of-network)			

**DRUG COVERAGE**

	Company (A)	Company (B)	Company (C)
Generic Drugs			

### OTHER IMPORTANT FACTORS

List any additional factors that may be important for your health insurance coverage.

Additional Factors	Company (A)	Company (B)	Company (C)

## NOTES

Write down any other important points about your health insurance comparison process.

Seek the advice of a state-licensed health insurance agent, who can help you match your medical needs with the best plan to cover them - at the lowest cost for you.

