# Health Insurance Cost Breakdown

## Cost Sharing for Services

<table>
<thead>
<tr>
<th>Insured</th>
<th>Insurer</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Before Annual Deductible</strong></td>
<td><strong>$0.00</strong></td>
</tr>
<tr>
<td>• Copayments</td>
<td>• $0.00</td>
</tr>
<tr>
<td>• 100% of cost for services</td>
<td><strong>After Annual Deductible</strong></td>
</tr>
<tr>
<td>• Copayments</td>
<td>• Coinurance – % of cost for services (90%, 80%, 70%, 60% - according to plan)</td>
</tr>
<tr>
<td>• Coinurance – % of cost for services (10%, 20%, 30%, 40% - according to plan)</td>
<td><strong>After Maximum Annual Out-of-Pocket</strong></td>
</tr>
<tr>
<td>• $0.00</td>
<td>• 100% of cost for services</td>
</tr>
</tbody>
</table>

## Notes:
- Preventive services are free of charge (no copay, no coinsurance)
- When a family is insured, there may be a deductible per individual and per family
- Copayments apply to visits, services and prescription drugs
- In some instances, coinsurance may apply before annual deductible
- Deductible and Maximum Out-of-Pocket follow an annual cycle