



MEDICAL COST PROJECTION

8/25/2021 6:58 PM

Manor - PMANOR02

08/25/21

MEMBER OPTION

4%

Current Plan

2020-2021
Current Rates
P85-50-35 \$30 OV
80% / 50%
PPO
\$500 In Ded
\$750 Out Ded
\$3,500 In OOP
\$30 OV
DAW1&2 Rx Plan

EE	\$566.66
EE + Spouse	\$1,150.32
EE + Child(ren)	\$997.32
EE + Family	\$1,671.66

New Plan Options

2021-2022

	Option 1 3.53% Increase Copay-500-4K ER 80% / 50% PPO (copay) \$500 In Ded \$1,000 Out Ded \$4,000 In OOP \$0 Tela Health Copay \$30 OV/\$45 SP/\$75 UC/\$500 ER Copay DAW1&2 Rx Plan	Option 2 6.47% Increase Copay-500-3K ER 80% / 50% PPO (copay) \$500 In Ded \$1,000 Out Ded \$3,000 In OOP \$0 Tela Health Copay \$30 OV/\$45 SP/\$75 UC/\$500 ER Copay DAW1&2 Rx Plan	Option 3 0.35% Decrease Copay-750-4K ER 80% / 50% PPO (copay) \$750 In Ded \$1,500 Out Ded \$4,000 In OOP \$0 Tela Health Copay \$30 OV/\$45 SP/\$75 UC/\$500 ER Copay DAW1&2 Rx Plan	Option 4 2.41% Increase Copay-750-3K ER 80% / 50% PPO (copay) \$750 In Ded \$1,500 Out Ded \$3,000 In OOP \$0 Tela Health Copay \$30 OV/\$45 SP/\$75 UC/\$500 ER Copay DAW1&2 Rx Plan
EE	\$586.68	\$603.30	\$564.66	\$580.34
EE + Spouse	\$1,190.96	\$1,224.70	\$1,146.26	\$1,178.10
EE + Child(ren)	\$1,032.56	\$1,061.80	\$993.80	\$1,021.40
EE + Family	\$1,730.70	\$1,779.70	\$1,665.72	\$1,712.00

Please sign & date option chosen:

Signature / Date

Signature / Date

Signature / Date

Signature / Date

DAW1&2 Plan: If a brand name drug is dispensed and a generic alternate drug exists, the Covered Individual pays the difference between the brand name and generic price in addition to the appropriate copayment for the brand name. The cost difference between the brand name and generic price does not apply to any individual deductibles or out of pocket amounts. The differential applies to all prescriptions purchased through this program when a generic alternate is available.

NonDAW Plan: If a brand name drug is dispensed and a generic alternate drug exists, the Covered Individual pays the appropriate brand copay.

THIS DOES NOT COMPLETE THE RERATE PROCESS. YOU WILL NEED TO SIGN THE MEMBER OPTION AND DO ONE OF THE FOLLOWING BY 09/24/2021:

1. Scan an image of the signed member option and email it to underwriting@tmlhb.org, or
 2. Fax the signed member option to (512) 719-6541, attn: Underwriting
- THEN A NEW RERATE NOTICE WILL BE GENERATED AND MAILED TO YOU. THE RERATE SHEET MUST BE SIGNED AND RECEIVED IN AUSTIN BY 10/01/2021 FOR THE NEW BENEFITS AND RATES TO BE EFFECTIVE FOR 01/01/2022.