Health Plan Comparison Worksheet

Compare up to 3 plans side by side — prepared by Balcones Advisors

Plan Overview

FEATURE	PLAN A	PLAN B	PLAN C
Plan Name / Carrier	_____	_____	_____
Plan Type (HMO/PPO/EPO/POS)	_____	_____	_____
Network Size	_____	_____	_____

Monthly Costs

COST	PLAN A	PLAN B	PLAN C
Monthly Premium	$ _____	$ _____	$ _____
Annual Premium Cost (× 12)	$ _____	$ _____	$ _____
Employer/Subsidy Contribution	$ _____	$ _____	$ _____
Your Net Monthly Cost	$ _____	$ _____	$ _____

Deductibles & Out-of-Pocket

LIMIT	PLAN A	PLAN B	PLAN C
Individual Deductible	$ _____	$ _____	$ _____
Family Deductible	$ _____	$ _____	$ _____

Individual Out-of-Pocket Max	$ _____	$ _____	$ _____
Family Out-of-Pocket Max	$ _____	$ _____	$ _____

Copays & Coinsurance

SERVICE	PLAN A	PLAN B	PLAN C
Primary Care Visit	$ _____	$ _____	$ _____
Specialist Visit	$ _____	$ _____	$ _____
Urgent Care	$ _____	$ _____	$ _____
Emergency Room	$ _____	$ _____	$ _____
Hospital Stay (per day)	$ _____	$ _____	$ _____
Lab Work / Imaging	_____	_____	_____

Prescription Drug Coverage

TIER	PLAN A	PLAN B	PLAN C
Generic (Tier 1)	$ _____	$ _____	$ _____
Preferred Brand (Tier 2)	$ _____	$ _____	$ _____
Non-Preferred (Tier 3)	$ _____	$ _____	$ _____
Specialty (Tier 4)	$ _____	$ _____	$ _____
Rx Deductible	$ _____	$ _____	$ _____

Check each plan's formulary to confirm your specific medications are covered and at which tier.

Your Doctors & Providers

PROVIDER	PLAN A IN-NETWORK?	PLAN B IN-NETWORK?	PLAN C IN-NETWORK?
_____	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
_____	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
_____	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
_____	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

Additional Benefits

BENEFIT	PLAN A	PLAN B	PLAN C
Dental	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Vision	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Mental Health	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Telehealth	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Maternity	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

Bottom-Line Comparison

SCENARIO	PLAN A TOTAL	PLAN B TOTAL	PLAN C TOTAL
Best Case (premiums only, no claims)	$ _____	$ _____	$ _____
Moderate Use (premiums + deductible)	$ _____	$ _____	$ _____

Worst Case (premiums + OOP max)	$ _____	$ _____	$ _____

> 💡 **The right plan isn't always the cheapest premium.** Compare your worst-case annual cost (premiums + max out-of-pocket). That's your real exposure. A higher premium with lower OOP max can save thousands in a bad year.

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