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| *This message is part of an email series offering tips for good health and advice to help you understand and get the most out of your Premera Blue Cross health plan.* |
| What’s the right medical plan for you? If you’re trying to choose between a Peak Care, an exclusive provider network (EPO)\*, a preferred provider organization (PPO) plan, and a high-deductible health plan (HDHP) with a health savings account (HSA), use the tips below to help you decide what’s best for you.  **Consider a Peak Care EPO plan if:**  You want a health plan that offers the lowest cost of coverage for you or your entire family with the lowest out-of-pocket costs and deductibles, with the convenience of a local network. You’ll pay less for your medical care when you choose to see an in-network provider. Care received out of network is not covered, except in emergencies.  **Consider a plan with an HSA if:**  You want to lower your taxable income while saving for future healthcare expenses. The HSA is flexible: You can take the account with you if you leave the company for any reason, and you can start or stop your contributions at any time.  **Consider a PPO plan if:**  You want to manage your care with the least amount of effort. There are no claims or IRS tax forms to file and no HSA to manage.  **Consider a Peak Care EPO, a PPO plan, or a HDHP with an HSA if:**  You want preventive care services covered at no cost. All Premera health plans cover preventive care at no additional cost for services such as annual checkups and routine screenings!  Before making a final decision, consider:   * Your anticipated medical expenses for the coming plan year * If you have money set aside to pay out-of-pocket expenses if you need care * How important it is for you to have the flexibility to see any provider you choose * The amount of money you are comfortable paying per paycheck   **NOTE**  This information is not intended to be tax or legal advice. Consult your own tax advisor to determine any tax implications of a health plan with an HSA.  \*An EPO, or exclusive provider is a type of health plan that offers a local network of doctors and hospitals for you to choose from. |
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