

The 10 Tips

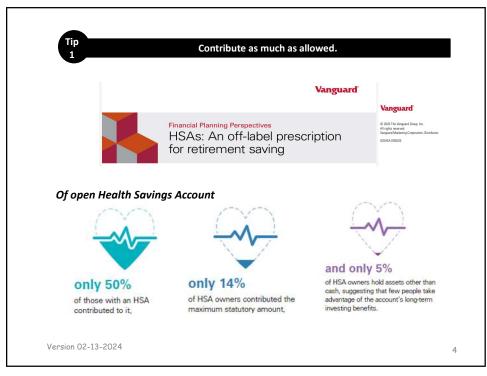
- 1. Contribute as much as allowed.
- 2. Have your eligible dependents open their own HSA.
- 3. Consider investment opportunities.
- 4. Plan for retirement.
- 5. Keep track of qualified expenses.
- 6. Reconcile your transactions.
- 7. Always pay yourself back.
- 8. Take advantage of all tax advantaged account opportunities.

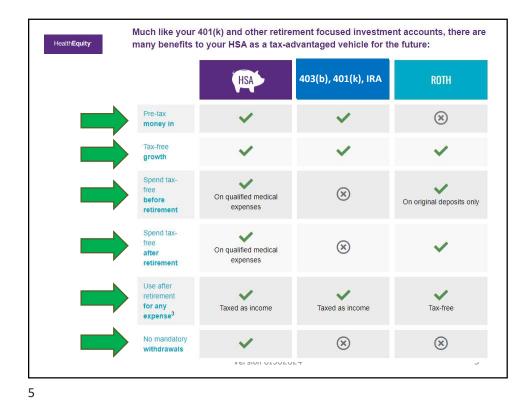
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- 9. Shop around and use carrier/insurance company pricing tools.
- 10. Seek out opportunities to save on your drug costs.

3

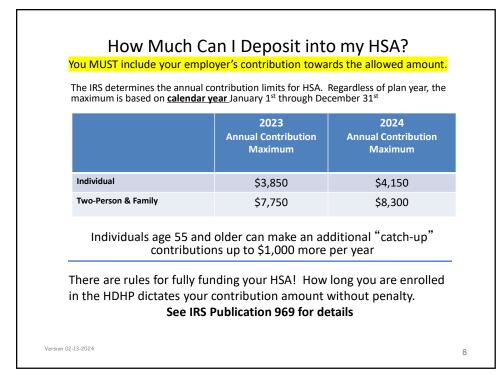
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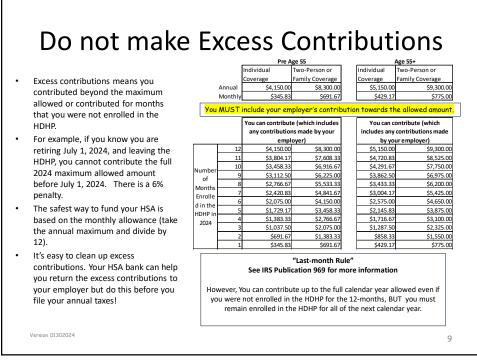




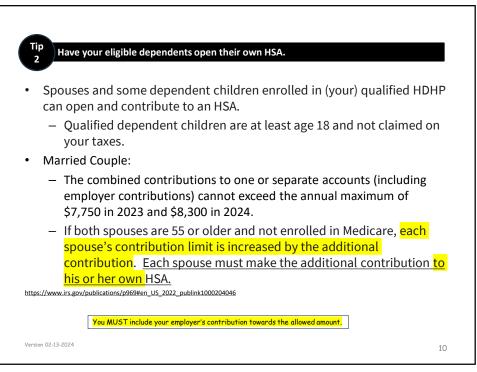
Spending Power					
22% Tax Rate					
Health Savings Account	401k, 403b				
\$55,000	\$500,000				
\$55,000	\$390,000				
100%	78%				
(distributions for eligible expenses are not taxed)	(distributions of any kind are taxed)				
Part B premium is reimbursa hanged from 2024 cost, 20 y \$41,920.	ble with HSA money. years of Part B premium wou				
\$41,920.					
	Health Savings Account \$55,000 \$55,000 (distributions for eligible expenses are not taxed) Part B premium is reimbursa hanged from 2024 cost, 20 y				

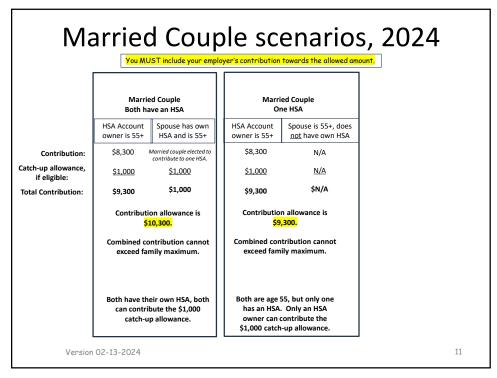


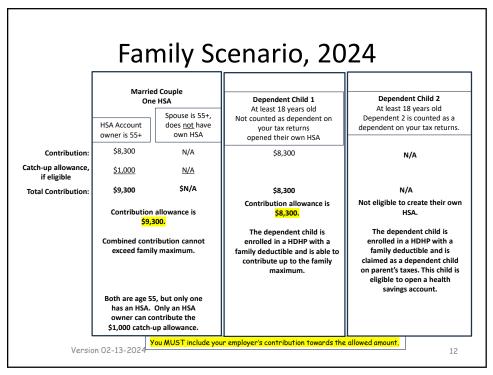


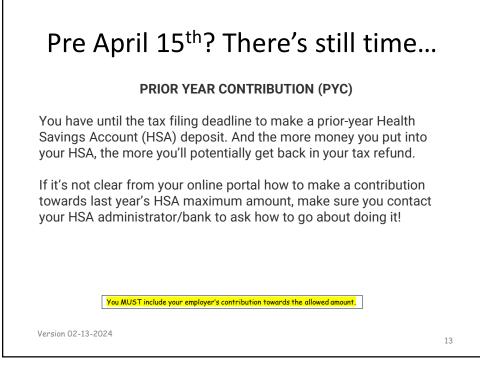


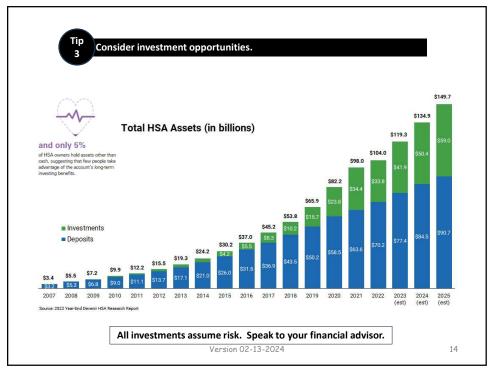




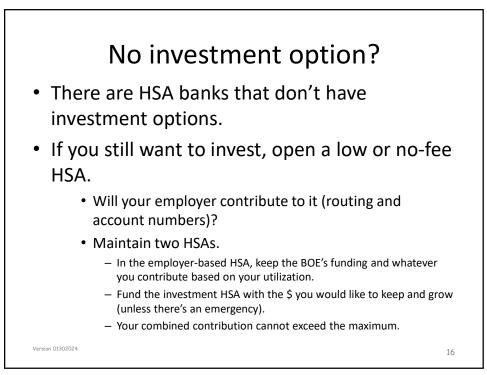








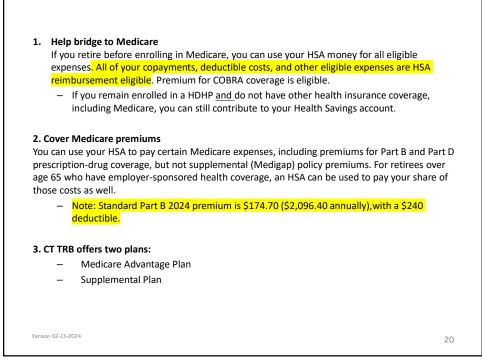




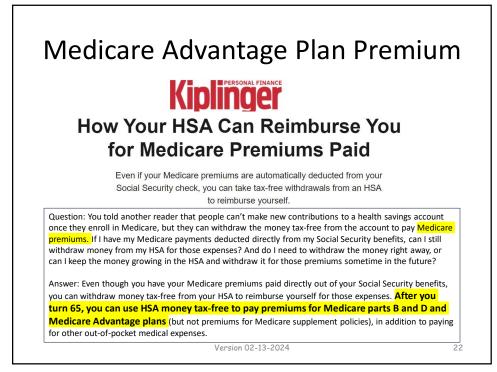
Have an IRA? Talk to your financial advisor about a once-in-a-lifetime limit per taxpayer rollover to your HSA. (IRS Notice 208:51)

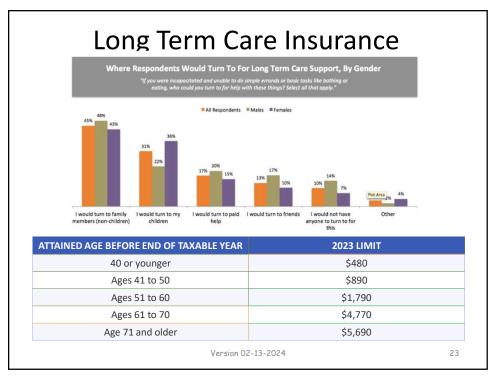
Con Data Car	Ison Senior Contributor @
Retiremen	
1 research,	wrue about all fucets of retirement/retirement planning.
	ters Kiplinger
	Home Investing Retirement Taxes Personal Finance Your Business Wealth Creation More - My Kiplinger -
	Hone II Relament II Relament Russ II 4020(S 4020)
	Rolling Over Retirement Savings to a Health Savings Accoun

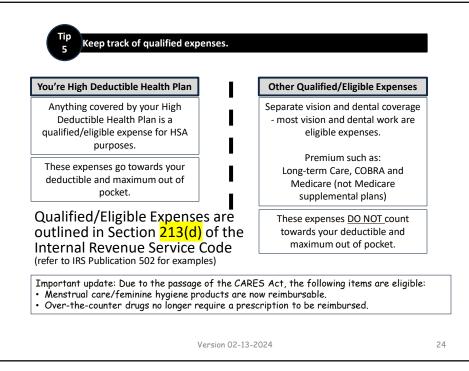
Insura	nce Premium
From IRS	Publication 969
You can'i following	treat insurance premiums as qualified medical expenses unless the premiums are for any of the
1.	Long-term care insurance.
2.	Health care continuation coverage (such as coverage under COBRA).
3.	Health care coverage while receiving unemployment compensation under federal or state law.
4.	Medicare and <mark>other health care coverage if you were 65 or older (</mark> other than premiums for a Medicare supplemental policy, such as Medigap).
Number	2: The question with conflicting answers is: Is "such as" only COBRA, or any continuation coverage?
	ing on your BOE's insurance, if not COBRA, considered "health care continuation coverage," per # 2? hately, I have found too many Yes and No answers and nothing definitive from the IRS.

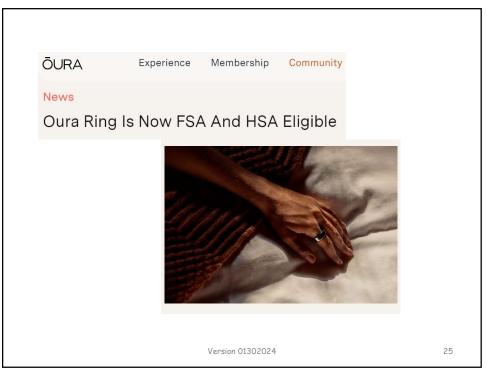


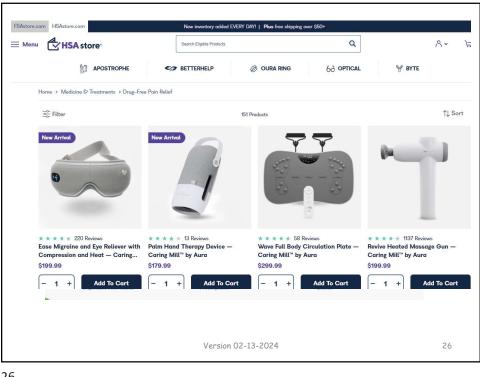


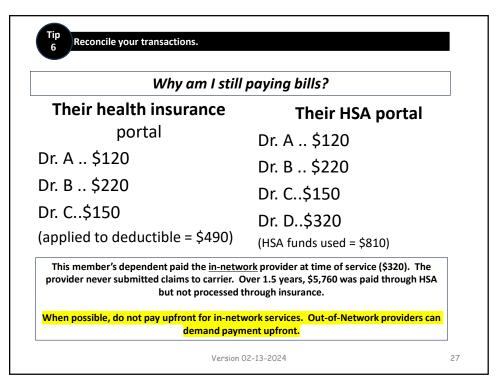


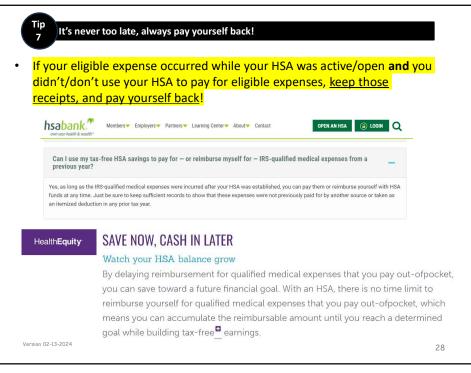


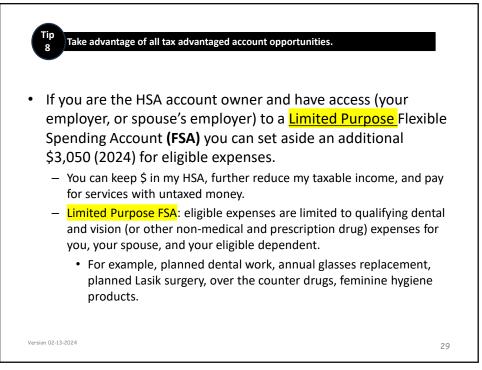


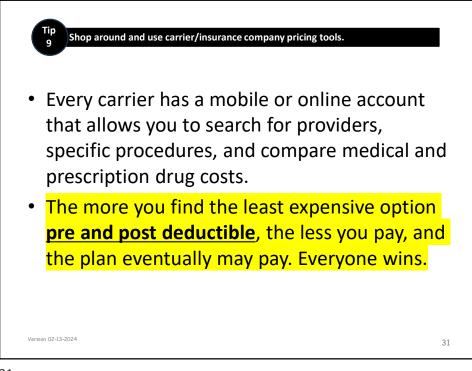










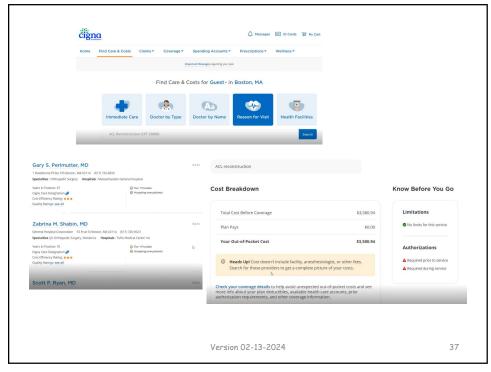


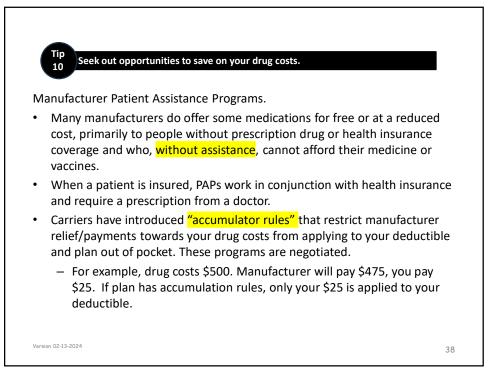
Feb 19, 2017				
By Jamie Cleverley				
Hospital Prices as a Percentage of Free-Standing Imaging Prices		Hospital Prices as a Percentage of Free-Standing Lab Prices National average hospital charges for lab services outpace those charged by free-standing providers.		
National average hospital charges for imaging services outpace those cha	arged by free-standing			
		Lab tests - chemistry	177%	
Standard imaging — nuclear medicine	308%	Lab tests - drug testing	153%	
Standard imaging — breast/chest	202%	Lab tests - hematology and coagulation	257%	
Standard imaging – musculoskeletal	298%	Lab tests - immunology	122%	
Standard imaging — other	185%	Lab tests - microbiology	194%	
Advanced imaging – CT/CTA scan brain/head/neck	249%	Lab tests - organ or disease-oriented panels	298%	
Advanced imaging — CT/CTA scan other	235%	Lab tests - pathology	112%	
Advanced imaging — MRI/MRA brain/head/neck	180%	Lab tests - reproductive medicine procedures	136%	
Advanced imaging — MRI/MRA other	170%	Lab tests - routine venipuncture	151%	
Echography/ultrasonography — cardiac/carotid arteries	292%	Lab tests - therapeutic drug assays	201%	
Echography/ultrasonography – other	256%	Lab tests - transfusion medicine	385%	
Note: A value of 100 percent signifies that the prices are equivalent, while a value of 200 percent would imply that the average hospital price is twice as high. Key: CII = Computed tomography		Lab tests - urinalysis	222%	
		Lab tests - other procedures	136%	
CTA = Computed tomography angiography MRA = Magnetic resonance angiogram		Note: A value of 100 percent signifies that the prices are equivalent, while a value of 200 percent would imply the		
MRI = Magnetic resonance imaging Source: Cleverley + Associates, Worthington, Ohio. Used with permission.	19 the average hospital price is twice as high.			
-	cial Planning, Spring 2017 (Hma.org/stp).		c Financial Planning, Spring 2017 (hlma.org/s	
Example, A CT scan in a hospital cou	uld cost you	Lab work in a hospital setting o	ould be doubl	
+235% more than a free-standing	'	1 0		
+235% more than a free-stanuin	g lacility.	what a free-standing facili	ty charges.	

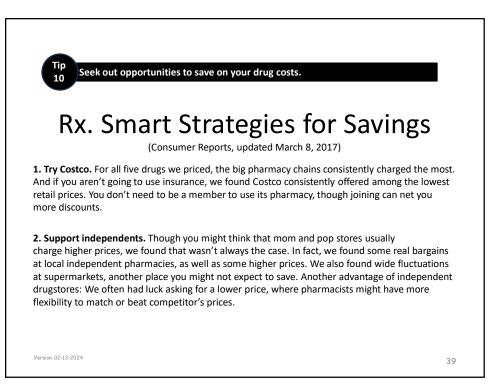
RETAILER	TAILER PRICE TOTAL						
	Pioglitazone (Actos)	Celecoxib (Celebrex)	Duloxetine (Cymbalta)	Atorvastatin (Lipitor)	Clopidogrel (Plavix)	PRICE	
HealthWarehouse. com	\$12	\$22	\$13	\$10	\$10	\$66	
Costco [1]	\$16	\$26	\$35	\$13	\$16	\$105	
Independents [2]	\$19 (\$10-\$493)	\$34 (\$11-\$295)	\$31 (\$20-\$267)	\$15 (\$8-\$197)	\$15 (\$8-\$260)	\$107 (\$69-\$1,351)	
Sam's Club [1]	\$20	\$38	\$31	\$20	\$45	\$153	
Walmart	\$132	\$203	\$123	\$30	\$30	\$518	
Kmart	\$160	\$185	\$120	\$35	\$35	\$535	
Grocery Stores [3]	\$113 (\$10-\$349)	\$189 (\$46-\$250)	\$170 (\$13-\$223)	\$32 (\$11-\$71)	\$36 (\$7-\$224)	\$565 (\$88-\$1,117)	
Walgreens	\$167	\$204	\$251	\$65	\$65	\$752	
Rite Aid	\$255	\$194	\$170	\$128	\$119	\$866	
CVS/Target	\$270	\$187	\$195	\$135	\$141	\$928	

Version 02-13-2024









Rx. Smart Strategies for Savings (cont'd)

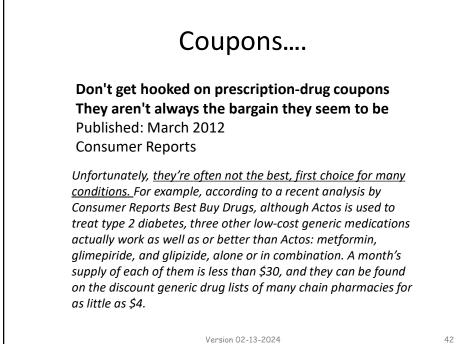
3. Don't always use your health insurance. Many chain and big-box stores offer hundreds of common generics at prices as low as \$4 for a 30-day supply and \$10 for a 90-day supply for people who pay out of pocket. Sam's Club (not union friendly) even fills some prescriptions free for members. Check the fine print: There may be a small fee to sign up, and not all discount programs are open to people with Medicare, Medicaid, or Tricare insurance. And keep in mind that when you bypass your insurance, money spent on your medication won't count toward your deductible or out-of-pocket maximums. (However, still submit those expenses for reimbursement.)

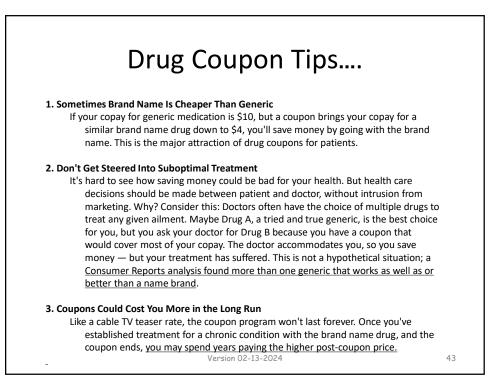
4. Always ask "Is this your lowest price?" Victor Curtis of Costco told us that its contracts for Medicare Part D plans prohibit pharmacists from offering a better cash price to a customer unless a customer asks. And Rite Aid told us that their pharmacists process prescriptions through insurance unless customers tell them to do otherwise. Usually, we found that asking can prompt the person on the phone to dig a bit for any available discount programs, cards, and coupons. Check back often, because prices and offers may change. And never assume that one pharmacy's "discounted" price is lower than another's regular price.

5. Seek a 90-day prescription. For drugs you take long term, it can be more convenient and even cheaper. For example, if you use insurance, you'll pay one co-pay rather than three. And for discount generic drug programs, paying \$10 for a 90-day supply works out to less than \$4 every v30,days2024

40







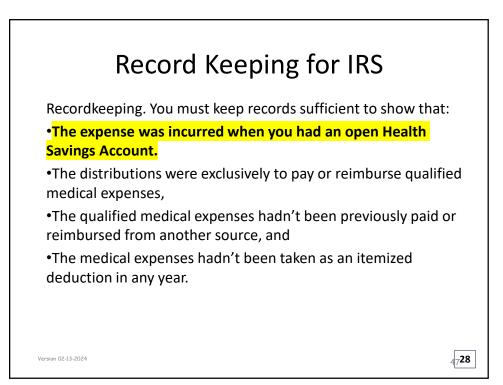
If you don't use insurance to pay for prescriptions...

- Contact your insurer and ask how they handle such claims.
- If plan will process claim, keep your receipts, get claim submission forms from your carrier, complete the forms, and submit for accumulation towards deductible or, if applicable, reimbursement post-deductible.
- Most carriers allow manufacture payments to count towards your deductible and maximum out-of-pocket.
- Fully insured have to apply the manufacturer's payment/assistance, self-insured depends on how employer sets up plan.
 - Anthem, Cigna, Connecticare allow for submission of such claims. UHC does not.

46



Version 02-13-2024



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48

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