

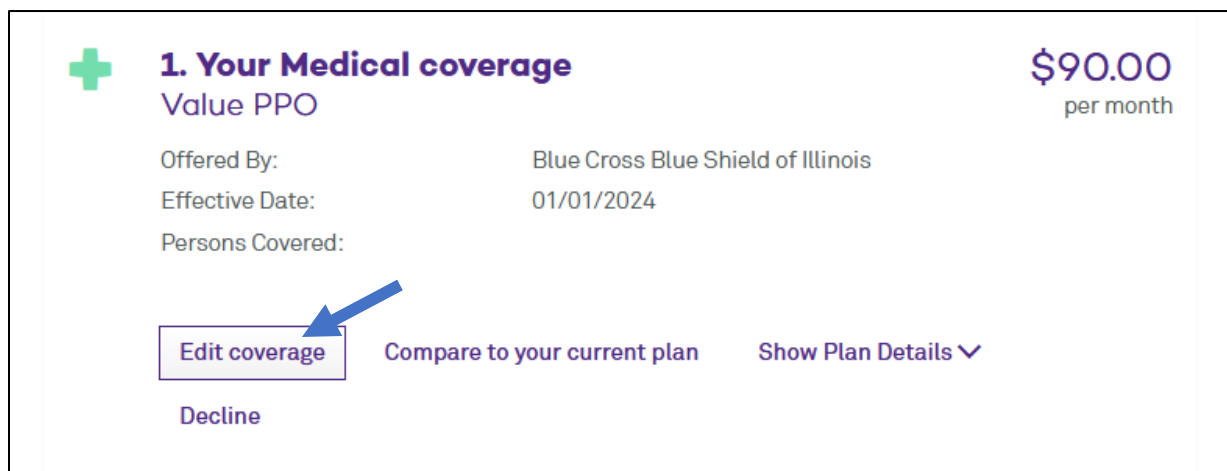
The online enrollment platform provides a tool that will help you estimate the annual costs and do a side-by-side comparison of the four medical plans. The tool is housed in the online enrollment system in myHR. The instructions provided in this guide will help you access and navigate the online tool.

Accessing the system

1. Login to myHR at <https://myhr.northwestern.edu>.
2. Select the Benefits tile.
3. Click My Health Benefits Elections on the left.
4. Select Begin open enrollment.

Opening the decision tool

5. Select Edit coverage for your medical plan.



1. Your Medical coverage **\$90.00**
per month

Value PPO

Offered By: Blue Cross Blue Shield of Illinois

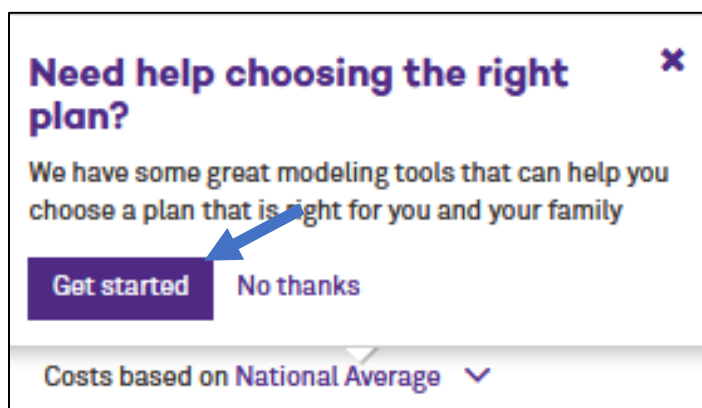
Effective Date: 01/01/2024

Persons Covered:

[Edit coverage](#) [Compare to your current plan](#) [Show Plan Details](#) ▼

[Decline](#)

6. Choose Get started to access the decision tool. [if there is not a pop-up box, select *National Average*]



Need help choosing the right plan? ✕

We have some great modeling tools that can help you choose a plan that is right for you and your family

[Get started](#) [No thanks](#)

Costs based on **National Average** ▼

7. Use the national average or customize your usage.

Personalize your estimated cost
 Your estimated annual cost is based on the details below. Personalize for a more accurate cost estimation.

Costs based on **National Average** ^ Tax Savings **+ Add Contribution** ^

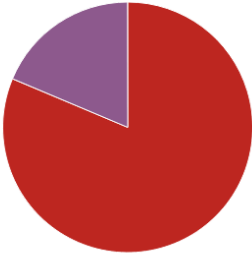
Tell us about your expected healthcare usage
 Choose from one of our pre-defined usage scenarios or personalize your usage for the upcoming plan year and we will estimate how much each plan will cost you.

National Average Note: Number of uses and costs are based on national claims averages for persons with similar age, gender, and regional demographics as you and your dependents.

Customize Usage

0	Immediate Medical Care ?	\$0.00
0	Outpatient Care ?	\$0.00
0	Inpatient Hospitalization ?	\$0.00
5	Physician Office Care ?	\$1,110.85
4	Prescription Drugs and Refills ?	\$254.88
Total Usage Cost		\$1,365.73

Done



8. Enter contributions for both FSA and HSA for next year.

Estimate Your Tax Benefit
 Contributing to a tax-advantage savings account with pre-tax dollars can lower your taxable income and save you money. Find out how much below!

Filing Status: **Head of Household**

Household Income: \$

Tax Bracket: %

HSA Annual Contribution: \$

FSA Contribute Maximum

Total savings: \$0.00

	Minimum	Maximum	55+ Additional
Single	—	\$4,150.00	\$1,000.00
Family	—	\$8,300.00	\$1,000.00

Done **Cancel**

- You will then see an estimated annual cost based on usage and tax savings.

PPO **Select PPO 2024** **\$156.00**
Monthly Cost

FSA This plan gives you the flexibility to choose any doctor/hospital that you wish without requiring a primary care physician (PCP) referral. You receive greater benefits and pay lower out-of-pocket costs when you see a provider who is a member of the Northwestern Medicine or BlueCross BlueShield PPO Network.

Compare

Estimated Annual Cost \$3,117.73 **FSA Tax Savings \$120.00**

How was this calculated? [Edit](#)

Individual Deductible	\$850
Family Deductible	\$2,550
Individual Out of Pocket Max (OOP Max)	\$3,000
Family Out of Pocket Max (OOP Max)	\$8,000

Select plan **Plan details** **Compare to last year**

9. You can select Compare for two or more plans to see a side-by-side comparison.

Compare plans & estimate your cost ²

PPO

FSA

Compare

Premier PPO 2024

\$377.00
Monthly Cost

This plan gives you the flexibility to choose any doctor/hospital that you wish without requiring a primary care physician (PCP) referral. You receive greater benefits and pay lower out-of-pocket costs when you see a provider who is a member of the Northwestern Medicine or BlueCross BlueShield PPO Network.

Estimated Annual Cost **\$5,889.73** | FSA Tax Savings
How was this calculated? | Add Contribution

Individual Deductible	\$500
Family Deductible	\$1,500
Individual Out of Pocket Max (OOP Max)	\$2,400
Family Out of Pocket Max (OOP Max)	\$6,600

Select plan | Plan details | Compare to last year

PPO

FSA

Compare

Select PPO 2024

\$156.00
Monthly Cost

This plan gives you the flexibility to choose any doctor/hospital that you wish without requiring a primary care physician (PCP) referral. You receive greater benefits and pay lower out-of-pocket costs when you see a provider who is a member of the Northwestern Medicine or BlueCross BlueShield PPO Network.

Estimated Annual Cost **\$3,237.73** | FSA Tax Savings
How was this calculated? | Add Contribution

Individual Deductible	\$850
Family Deductible	\$2,550
Individual Out of Pocket Max (OOP Max)	\$3,000
Family Out of Pocket Max (OOP Max)	\$8,000

Select plan | Plan details | Compare to last year

	Premier PPO 2024 \$377.00 Monthly Cost	Select PPO 2024 \$156.00 Monthly Cost
	Select plan	Select plan
In-Network		
Individual Deductible	\$500	\$850
Family Deductible	\$1,500	\$2,550
Individual Out of Pocket Max (OOP Max)	\$2,400	\$3,000
Family Out of Pocket Max (OOP Max)	\$6,600	\$8,000
Doctor's Office Visit	\$25	\$25
Inpatient Hospital Services	10% Coinsurance	20% Coinsurance
Outpatient Hospital Services	10% Coinsurance	20% Coinsurance
Emergency Room Visit	\$150 copay + 10% Coinsurance	\$150 copay + 20% Coinsurance
Prescription Drugs - Generic	\$10/\$20	\$10/\$20
Tier 2 - Preferred Drugs	\$30/\$60	\$30/\$60
Tier 3 - Nonpreferred Drugs	\$60/\$120	\$60/\$120
Tier 4 - Specialty Drugs	\$90/\$180	\$90/\$180