MONEY MAN 4 Integrity®
"Annuity, Life and Health Insurance"

The Smart Health Insurance Guide



Understand Your Options.
Protect Your Health and Budget.

Money Man 4 Integrity • Annuity, Life & Health Insurance

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Welcome to MM4I

Serving Houston families with clear, practical insurance guidance.

- Licensed insurance agency.
- Free, no-obligation reviews.



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Annuities

A way to help support your retirement goals with steady, tax-advantaged growth options.

Life Insurance

Protection for the people you love, helping provide financial security when they need it most.

Health Insurance

Coverage options that can help you manage healthcare costs and access quality care.



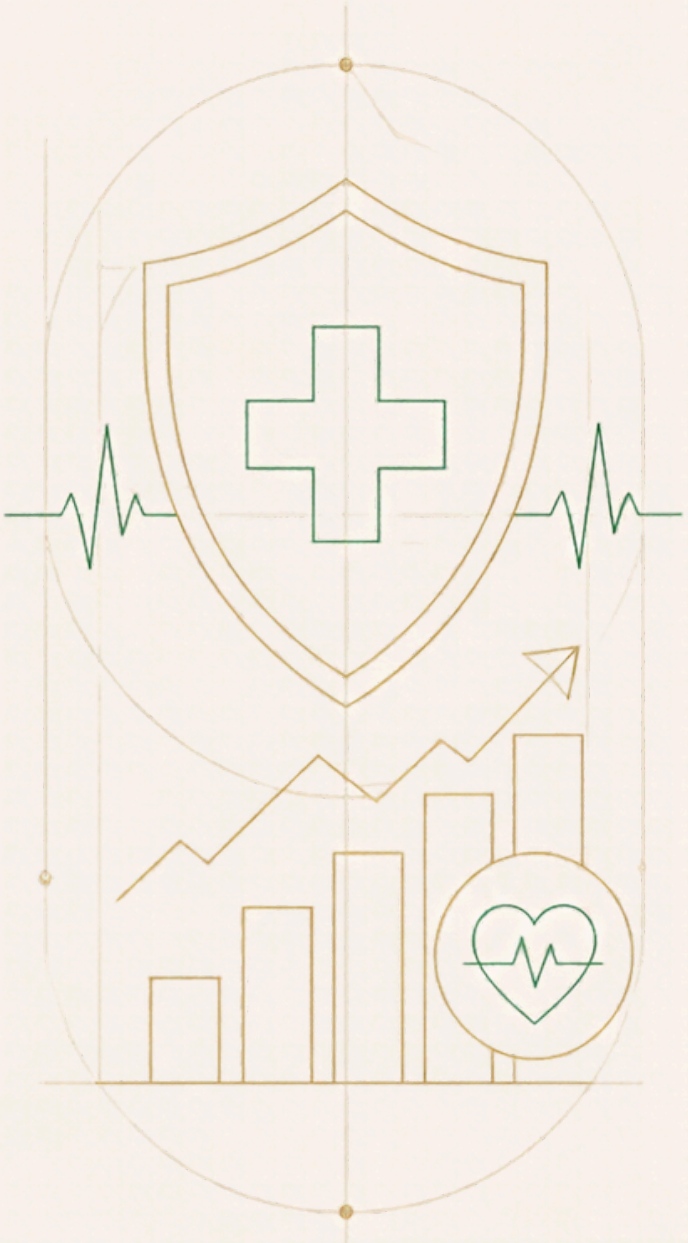
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The Smart Health Insurance Guide

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Health Insurance Costs Explained

Premium – monthly cost

Deductible – what you pay before the plan shares costs

Copay – flat fee per visit

Coinsurance – your percentage after the deductible

Out-of-pocket maximum – yearly cap on covered in-network costs



> Compare total yearly cost, not just the premium.

HOW COSTS FLOW

MONTHLY PREMIUM → DEDUCTIBLE (WHAT YOU PAY FIRST) → SHARED COSTS (COPAY + COINSURANCE) → ANNUAL OUT-OF-POCKET MAXIMUM

THE SMART

HEALTH INSURANCE GUIDE



HMO vs PPO vs EPO vs HDHP

	HMO	PPO	EPO	HDHP
Network flexibility	Narrower network	Broader network	Moderate network	Broader network
Referrals	Usually required	Not usually required	Not usually required	Not usually required
Out-of-network coverage	Not typically covered	Generally covered	Not typically covered	Generally covered
Premium level	Generally lower	Generally higher	Generally lower	Generally lower
HSA eligibility	Not eligible	Not eligible	Not eligible	HSA-eligible

Plan rules vary by carrier and market.

Bronze vs Silver vs Gold

Bronze

plan pays about 60% on average; fits low expected use with strong reserves.

Silver

plan pays about 70% on average; the middle path and required for cost-sharing reductions.

Gold

plan pays about 80% on average; fits higher expected use and more predictable costs.

Metal levels measure cost sharing, not quality.





HSA Strategy After 45



- **2026 HSA limits:** $4,400 self-only / $8,750 family
- **Extra $1,000** catch-up at 55+
- **HDHP minimum deductible:** $1,700 self-only / $3,400 family
- **Contributions stop** when Medicare starts
- **Triple tax advantage**

> "An HSA works best as one part of a coordinated plan."

Triple tax advantage

1. **Contributions**
   May be tax-deductible
2. **Growth**
   Grows tax-free
3. **Withdrawals**
   Tax-free for qualified medical expenses

Prescription Drug Coverage



Prescription drugs can be one of your biggest health care expenses. Use this checklist to evaluate your plan's drug coverage and control your costs.

Check the formulary
Make sure your current medications are covered.

Review drug tiers
Understand how tier levels affect your copays and coinsurance.

Ask whether prior authorization applies
Some drugs require approval before the plan will pay.

Compare preferred pharmacies
Using in-network pharmacies can save you money.

Consider mail order
Mail order can offer convenience and lower copays for maintenance medications.

Calculate total yearly drug cost
Add up all prescriptions, copays, and fees to see the full picture.

Look Beyond the Copay

The lowest copay today may not be the lowest cost for the year. Consider your total annual drug expenses.

TOTAL YEARLY DRUG COST

Premiums + copays + coinsurance + pharmacy costs = your real yearly drug cost

SMARTER COVERAGE.
STRONGER TOMORROWS.

Evaluate your prescription drug coverage carefully to protect both your health and your financial well-being.

Family Health Insurance



Your family's health needs are unique. Comparing plans side by side helps you find coverage that fits today—and grows with you tomorrow.

Compare individual and family deductibles

Family deductibles are usually higher. Make sure the amount works for your budget.

Review individual and family out-of-pocket maximums

Know the most your family could pay in a year for covered care.

Confirm pediatric care coverage

Ensure well-child visits, vaccines, and specialist care are included.

Check networks for every family member

Make sure your preferred doctors, hospitals, and specialists are in network for everyone.

Account for ongoing care needs

Factor in prescriptions, therapy, chronic conditions, and other regular care.

One Plan. Complete Coverage for the Whole Family.



Family plans help protect what matters most—your health, your time, and your peace of mind.

Better coverage. Stronger together.

Self-Employed Health Insurance



Being self-employed gives you freedom and flexibility—along with the responsibility to secure your own health coverage. Here are five key considerations to help you make confident, informed decisions.

1. Marketplace plans
2. Premium tax credits based on income
3. HSA-eligible plans
4. Self-employed health insurance deduction
5. Budgeting for irregular income

PLAN FOR YOUR CASH FLOW

Map out income highs and lows to keep your health coverage consistent year-round.



Small Business Health Insurance



The right health plan supports your team and your business. Use these five decisions to compare options with confidence.

1 Group plans

Choose a plan type that fits your team—group medical, ICHRA, or other arrangements. Match coverage options to your business structure and employee needs.

2 Employee contribution

Decide how you'll contribute—fixed dollar amounts, percentage-based, or tiered by family status. Balance support for employees with your budget.

3 Network fit

Verify that important doctors, hospitals, and specialists are in network. Consider access across Houston and the areas where your team lives.

4 Employee retention

Strong benefits help attract and retain great people. Gather feedback and choose coverage that supports your team's well-being.

5 Compare total cost

Look beyond the monthly premium. Evaluate deductible, copays, out-of-pocket maximums, and administrative fees for the full picture.

Smart approach.

A thoughtful plan supports your team today and strengthens your business for tomorrow.

Health Insurance After Leaving Your Job



COBRA

- You pay the full premium plus an admin fee
- Keeps your doctors

Marketplace

- Special enrollment within 60 days of losing coverage
- Possible tax credits

> *"Model your total annual cost before choosing."*

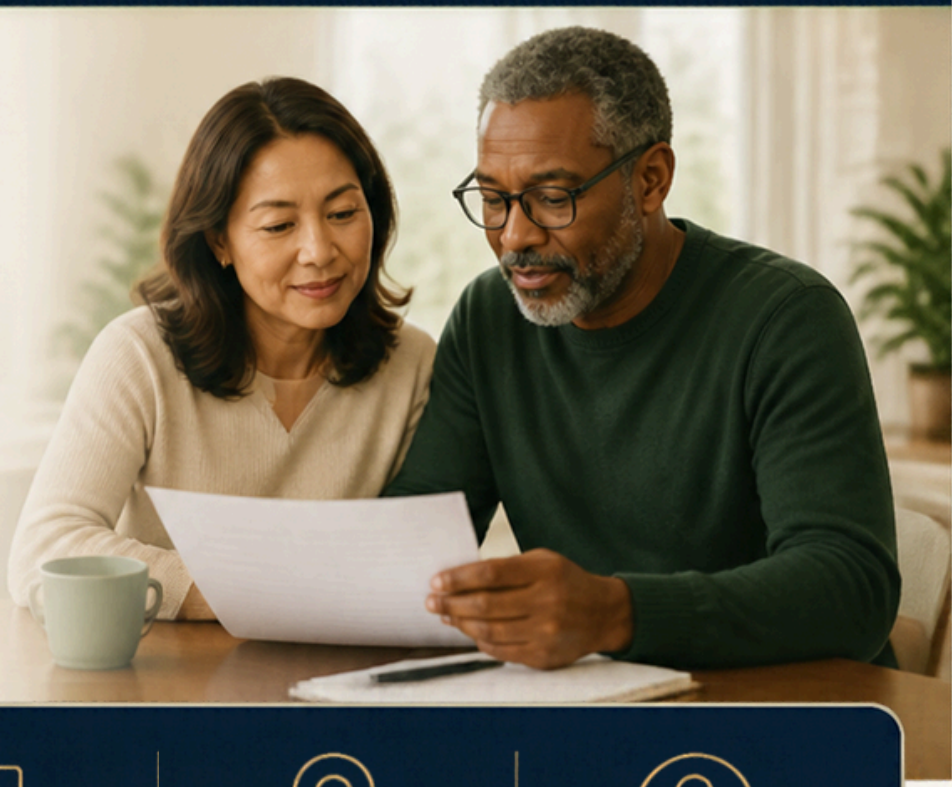
Your 60-Day Special Enrollment Window

LOSS OF COVERAGE
Your health coverage ends when you leave your job.

60–DAY WINDOW
You have 60 days to shop and enroll in a Marketplace plan.

COVERAGE STARTS
Coverage can begin as soon as your plan is effective.

Retiring Before 65



Leaving work before 65 can create a health insurance gap. With the right plan, you can protect your health and your savings until Medicare begins.

1
Bridge the gap to Medicare
You'll need coverage from the time you leave your job until Medicare begins at 65.

2
Budget for healthcare before Medicare
Plan for monthly premiums, deductibles, prescriptions, and unexpected care.

3
ZIP code changes premiums and networks
Where you live affects costs, provider choices, and plan options.

4
Income affects subsidies
Your household income may impact help you can get with monthly premiums.

THE JOURNEY TO MEDICARE

65

LEAVE WORK
Your employer coverage ends. You enter the insurance transition period.

BRIDGE COVERAGE
Use individual plans, COBRA, or other options to stay protected until Medicare begins.

MEDICARE BEGINS
At age 65, you can enroll in Medicare for your health coverage.

LOCATION & INCOME PLANNING

Where you live and what you earn shape your plan choices and potential savings.

PLANNING TODAY FOR A HEALTHIER TOMORROW
Smart decisions now create security and peace of mind later.



Medicare Supplement vs Medicare Advantage

Medicare Advantage	VS	Medigap
Private plan with networks and an annual out-of-pocket limit		Works with Original Medicare
Often includes drugs		Broader provider access
		Usually needs separate Part D

You can't have both.

Medigap open enrollment is 6 months starting at 65 with Part B.

Your Health Plan Review Checklist



- [ ] Doctors in network
- [ ] Prescriptions on formulary
- [ ] Deductible & out-of-pocket max
- [ ] HSA eligibility
- [ ] Total yearly cost
- [ ] Enrollment deadlines
- [ ] Subsidy eligibility
- [ ] Review every year





Key Takeaways

1. Compare total yearly cost, not just premium.
2. Understand deductible, copay, coinsurance, and out-of-pocket maximum.
3. Match network flexibility and plan design to your care needs.
4. Review prescriptions, pharmacies, and total drug cost.
5. Plan ahead for job changes, self-employment, retirement, and Medicare.
6. Revisit your coverage every year.

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Get Your FREE, No-Obligation Health Insurance Review

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For educational purposes only, not tax, legal or medical advice. Plan details vary by state and carrier.