

**Hi Rose!**

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## How are you today?

### An emergency?

Call 911 right now!

### Feel real bad?

Call 1-800-622-9524 and talk to a live nurse free on our FirstHelp line

### Not really sure?

Try our free [online symptom advisor](#).

### Want to feel better?

Our [BluePrint for Health](#) has many ways to help you feel better such as [stopping smoking](#) and other [care support programs](#)

### How is Harry?

### Blue Cross Member Savings

[25% Off Therapeutic Massage](#) or [Accupuncture](#)  
[Free one week Health Club trial and lowest membership rates](#)  
[Free shipping and discount prices on Health Care Products](#)

### Save time

[Sign up for online payments to/from accounts](#)  
[Automatic expense reimbursement reporting](#)

## How can we help you today?

How much would **this** cost me?

Drug, procedure, or medical test

[Show my health plan](#) | [I need a form](#) | [I need ID cards](#)

Find Dr.:

I need a doctor who does **this**

 **near**  

I need a prescription filled near

### How much do I owe?

Recent medical expenses

Find claim #

When	Claim	Who	What/Where	My Cost
12/01/2005	<a href="#">123546789</a>	Rose	Rx. Center	\$20.00
12/01/2005	<a href="#">123546789</a>	Harry	Specialty Ctr.	*\$420.00
12/01/2005	<a href="#">123546789</a>	Rose	Rx. Center	*\$23.13
12/01/2005	<a href="#">123546789</a>	Rose	Medical Clinic	*\$100.00
12/01/2005	<a href="#">123546789</a>	Rose	Rx. Center	*\$20.00
12/01/2005	<a href="#">123546789</a>	Rose	Dr. Jones	*\$20.00
12/01/2005	<a href="#">123546789</a>	Rose	Dr. Jones	*\$20.00

[Show me more](#)

My claim searches:

\* - Indicates reimbursed from medical accounts

### How much do I have left to pay?

Max. medical (in network)	<b>\$1,525.00</b>
Max. medical (out of network)	<b>\$3,500.00</b>
Deductibles to date:	<b>\$475.00</b>
Deductible maximum:	<b>\$2,000.00</b>

[Explain these](#)

### How much do I have left?

Available Medical Balance: **\$14,124.30**

Account	Balance
<a href="#">Flexible Spending (FSA)</a>	<b>\$0.00</b>
<a href="#">Health Savings (HSA)</a>	\$13,123.00
<a href="#">Health Reimbursement (HRA)</a>	\$1,001.30

**Total Medical Balance: \$14,224.30**

**Pending Requests: \$100.00**

### How much have I spent?

So far this year	<b>\$1,354.68</b>
So far this month	\$43.13
Last month	\$567.25

*This prototype presents answers to Rose's main questions on arrival. It is incomplete as a website. Missing Major Elements such as primary navigation and help options*

*This is a wireframe prototype for discussion of features and functionality only.*

*Fonts, colors, graphics, branding and other presentation elements are not to be considered at this time. Content is for conceptual discussion and review and not final.*

# Rose's herBlueCross v0.51 — Rose checks her cost of the drug "Placebo"

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## How much would this cost me?

Your cost for Placebo™: \$24.00



Drug, procedure, or medical test

NOTE: This is an estimate for the standard procedure without complications. Actual costs can vary widely depending on circumstances.

### Medical reimbursement accounts

Total Available Balance: \$14,124.30

Account	Balance
<a href="#">Flexible Spending (FSA)</a>	\$0.00
<a href="#">Health Savings (HSA)</a>	\$13,123.00
<a href="#">Health Reimbursement (HRA)</a>	\$1,001.30

Total Medical Balance: \$14,224.30

Pending Requests: \$100.00

### Here are cost comparisons for **Placebo™** and similar drugs

[Compare against all similar drugs](#)

Drug Name	<b>Placebo™</b>	<b>Sugapill</b>	<b>NutraSweePil™</b>	<b>AspartameTab™</b>
Maker	<a href="#">BigPharma</a>	<a href="#">Generic drug</a>	<a href="#">RxSupremo</a>	<a href="#">InflatoPharma</a>
Dosage	10 mg tablet (P)	10 mg tablet (sp)	10 mg capsule (NSP)	10 mg capsule (aT)
Type	<a href="#">Non-preferred brand</a> ?	<a href="#">Generic drug</a> ?	<a href="#">Non-preferred brand</a> ?	<a href="#">Experimental</a> ?
Your Cost (30 day supply)	<a href="#">Buy</a> <b>\$24.00</b> <a href="#">Explain my cost</a> ?	<a href="#">Buy</a> <b>\$10.69</b> <a href="#">Explain my cost</a> ?	<a href="#">Buy</a> <b>\$12.50</b> <a href="#">Explain my cost</a> ?	<a href="#">Buy</a> <b>\$163.00</b> <a href="#">Explain my cost</a> ?
Annual Cost	<b>\$288.00</b>	<b>\$288.00</b>	<b>\$288.00</b>	<b>\$1956.00</b>
Your Cost (mail order)	<a href="#">Buy</a> <b>\$16.00</b> <a href="#">Explain my cost</a> ?	<a href="#">Buy</a> <b>\$7.56</b> <a href="#">Explain my cost</a> ?	<a href="#">Buy</a> <b>\$8.25</b> <a href="#">Explain my cost</a> ?	<a href="#">Buy</a> <b>\$127.38</b> <a href="#">Explain my cost</a> ?
Warnings	None	None	<a href="#">Allergic reaction for certain sweeteners</a>	None
Used for	<ul style="list-style-type: none"> <li>General well being</li> <li>Light headaches</li> <li>Slight indigestion</li> <li>Minor diarrhea</li> <li>Assorted aches &amp; pains</li> </ul>	<ul style="list-style-type: none"> <li>General well being</li> <li>Light headaches</li> <li>Slight indigestion</li> <li>Minor diarrhea</li> <li>Assorted aches &amp; pains</li> </ul>	<ul style="list-style-type: none"> <li>General well being</li> <li>Light headaches</li> <li>Slight indigestion</li> <li>Minor diarrhea</li> <li>Reduce a</li> <li>Assorted</li> </ul>	<ul style="list-style-type: none"> <li>General well being</li> <li>Light headaches</li> <li>Slight indigestion</li> <li>Minor diarrhea</li> </ul>

Review treatment options & latest information about:

- [General well being](#)
- [Light headaches](#)
- [Slight indigestion](#)
- [Minor diarrhea](#)
- [Assorted aches & pains](#)

### Your cost for **Placebo™** (30 day supply)

Average Retail Price **\$30.00**

Non-preferred drug rate **-\$6.00**

Your cost **\$24.00**

Placebo™ is a "non-preferred brand" for this type of drug. There are identical, less expensive drugs from other companies. Your plan will pay 20% of the cost of this drug.

Your cost will be lower if you choose a preferred brand or generic. Your plan will play 50% of those drugs as well as their lower price.

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## How much would this cost me?

hip replacement

Go

Drug, procedure, or medical test

### How we estimated with your cost:

	<u>In Network / Extended Network</u>	<u>Out of Network</u>
<u>Typical cost:</u>	\$10,500.00	\$15,500.00
<u>Member cost:</u>	\$5,525.00	\$15,500.00
<u>Your plan pays:</u>	\$4,725.00	\$10,975.00
<b>Your Cost:</b>	<b>\$525.00</b>	<b>\$4,525.00</b>
	<a href="#">Show more details ?</a>	<a href="#">Show more details ?</a>
	<a href="#">Find these hospitals</a> <a href="#">Compare these hospitals</a>	<a href="#">Find these hospitals</a> <a href="#">Compare these hospitals</a>

**Your cost: \$525.00**

NOTE: This is an estimate for the standard procedure without complications. Actual costs can vary widely depending on circumstances.

### My maximums

Max. medical costs (in network)	\$1,525.00
Max. medical costs (out of network)	\$3,500.00
Deductibles to date:	\$475.00
Deductible maximum:	\$2,000.00
	<a href="#">Explain these ?</a>

### My medical reimbursements

Total Available Balance: \$14,124.30

Account	Balance
<a href="#">Flexible Spending (FSA)</a>	\$0.00
<a href="#">Health Savings (HSA)</a>	\$13,123.00
<a href="#">Health Reimbursement (HRA)</a>	\$1,001.30

Total Medical Balance: \$14,224.30

Pending Requests: \$100.00

### My total medical expenses

So far this year **\$1,354.68**

So far this month \$43.13

Last month \$567.25

### More about hip replacement

The procedure:

- [What is involved?](#)
- [What to expect](#)
- [What should I know and ask?](#)
- [Before the procedure](#)
- [After the procedure](#)
- [Alternatives to hip replacement](#)

Billing and paperwork:

- [What forms do I need?](#)
- [What bills will I get?](#)
- [What extra costs are common?](#)
- [Show me the costs after the procedure](#)

#### "Your cost" detailed

Surgery co-pay	\$100.00
Surgeon co-pay	\$100.00
Room co-pay	\$100.00
Specialist co-pay	\$100.00
X-ray co-pay	\$100.00
Rx co-pays	\$25.00
	<b>\$525.00</b>

# Rose's herBlueCross v0.51 — Rose checks recent expenses (herClaims)

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## Find claims

My searches:

Rose 2006 Rx



Go

Find claim #

Go

Who:

When:

Rose



Current plan year (2006)



Harry



From:



to

What/Where:

Your cost over: \$

Status:

All



Include graphs & summaries

Find

Clear

Save this search

## Matching claims

\* - Indicates reimbursed from medical accounts

Claim	When	Who	What/Where	Bill Amount	Your Cost	Status
<a href="#">1234567890123</a>	12/01/2005	Rose	Medical Clinic	\$450.90	Not set	processing
<a href="#">1235467890123</a>	12/01/2005	Rose	Specialty Clinic	\$2102.00	*\$420.00	done
<a href="#">1234567890123</a>	12/01/2005	Rose	Rx Center	\$78.13	*\$23.13	done
<a href="#">1235467890123</a>	12/01/2005	Rose	Medical Clinic	\$400.00	*\$20.00	done
<a href="#">1234567890123</a>	12/01/2005	Rose	Rx Center	\$100.00	*\$20.00	done
<a href="#">1235467890123</a>	12/01/2005	Rose	Dr. Jones	\$250.00	*\$100.00	done
<a href="#">1234567890123</a>	12/01/2005	Rose	Rx Center	\$100.00	*\$20.00	done
<a href="#">1235467890123</a>	12/01/2005	Rose	Rx Center	\$100.00	*\$20.00	done
<a href="#">1234567890123</a>	12/01/2005	Rose	Rx Center	\$100.00	*\$20.00	done
<a href="#">1235467890123</a>	12/01/2005	Rose	Rx Center	\$213.00	*\$53.00	done

Totals: **\$10,623.68** **\$1,354.68**

[next >](#)

## Maximums & Deductibles

Max. medical costs (in network) **\$1,525.00**

Max. medical costs (out of network) **\$3,500.00**

Deductibles to date: **\$475.00**

Deductible maximum: **\$2,000.00**

[Explain these](#)

## Medical reimbursement accounts

Total Available Balance: **\$14,124.30**

Account	Balance
<a href="#">Flexible Spending (FSA)</a>	<b>\$0.00</b>
<a href="#">Health Savings (HSA)</a>	\$13,123.00
<a href="#">Health Reimbursement (HRA)</a>	\$1,001.30

Total Medical Balance: **\$14,224.30**

Pending Requests: **\$100.00**

## My total medical expenses

So far this year **\$1,354.68**

So far this month **\$43.13**

Last month **\$567.25**

## Ways to reduce your costs

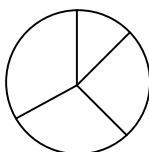
- [Generic drugs](#)
- [Use FirstHelp to avoid trips to hospital ER](#)

## Financial planning for future costs

- [Budgeting essentials](#)
- [HSA calculator](#)
- [Health care trends](#)
- [Health plan trends](#)

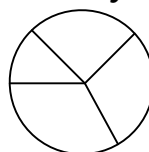
## Analysis of claims above:

### Your costs



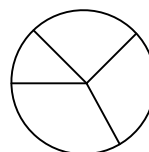
Copays:	\$979.68
Deductibles:	\$475.00
Shared cost:	\$200.00
<b>Total:</b>	<b>\$1,354.68</b>

### Where your costs went



Medical:	\$979.68
Prescription:	\$475.00
Emergency:	\$200.00
<b>Total:</b>	<b>\$1,354.68</b>

### Your total healthcare costs



Plan covered:	\$3,682.74
Member discounts:	\$5,586.56
Your costs:	\$1,354.68
<b>Total:</b>	<b>\$10,623.68</b>

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## Summary of Claim #1235467890123

[Next claim >](#)

**Your cost: \$420.00**

Who: Rose (01/01/1938)

What/Where: Specialty Clinic

When: 12/12/2005

Status: Done

<a href="#">Copay:</a>	\$20.00
<a href="#">Deductible:</a>	\$200.00
<a href="#">Shared cost (co-insurance):</a>	\$200.00
<a href="#">Other deductibles:</a>	\$0.00
<a href="#">Other Insurance:</a>	\$0.00
<b>Your Cost:</b>	<b>\$420.00</b>

[Explain my cost](#) ?

### How we came up with your cost:

Original cost:	\$2102.00
Member cost:	\$1250.00
Your plan paid:	\$830.00
<b>Your Cost:</b>	<b>\$420.00</b>

[View claim details \(EOB\)](#) ?

### How your cost was reimbursed

Your cost	\$420.00
<input checked="" type="checkbox"/> FSA money	\$420.00
Unpaid amount	\$0.00

[Show account details](#) ?

### Ways to save on this type of claim

- [In network clinics](#)
- [Alternative treatments](#)

### What increased your cost?

#### No referral

[!] We have no record of your doctor referring you to Specialty Clinic.

**If you WERE referred by your doctor: Contact his or her office (Your Clinic: 651-555-1212) and have them correct this by submitting a referral to Blue Cross.** This can significantly reduce your cost.

If you had this procedure on your own, **without** your doctor's referral, the plan only covers a reduced portion of the cost. In these situations your cost is reflected in the deductible and shared costs in addition to the standard co-pay.

### Maximums & Deductibles

Max. medical costs (in network)	\$1,525.00
Max. medical costs (out of network)	\$3,500.00
Deductibles to date:	\$475.00
Deductible maximum:	\$2,000.00

[Explain these](#) ?

### Medical reimbursement accounts

Total Available Balance: \$14,124.30

Account	Balance
<a href="#">Flexible Spending (FSA)</a>	\$0.00
<a href="#">Health Savings (HSA)</a>	\$13,123.00
<a href="#">Health Reimbursement (HRA)</a>	\$1,001.30
<b>Total Medical Balance:</b>	<b>\$14,224.30</b>
<b>Pending Requests:</b>	<b>\$100.00</b>

### My total medical expenses

So far this year **\$1,354.68**

FSA money **\$20.00**

### How we got the FSA amount

Amount available:	\$1435.25
Requested:	\$20.00
<b>FSA balance:</b>	<b>\$1415.25</b>

### FSA Payment information:

Processed:	12/12/2005
For dates:	12/12/2005-12/12/2005
Covered:	Medical - Deductible
Paid to you:	12/12/2005
How:	Direct deposit
Comments:	(none)

**Rose's Issue: PCC missed submitting clinic referral to Blue Cross (Her cost includes coinsurance & deductible) She needs an explanation (then a solution), NOT an EOB!**

1. We noticed it
2. We can tell her "why"
3. We can tell her what she can do to correct it (if it's a mistake)
4. We show her how to avoid this in the future



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## My Accounts

**Total available medical balance: \$14,124.30**

Total Medical Balance : **\$14,124.30**  
 Pending Requests: **\$100.00**  
 Total Available Medical Balance: **\$14,224.30**

My searches:

### Active Medical Accounts

Find this #

Account	Group Name	Start	End	Submit by	Balance
<a href="#">FSA (medical)</a>	ABC Company	01/01/2006	12/31/2006	03/01/2007	<b>\$0.00</b>
<a href="#">Health Savings (HSA)</a>	ABC Company	01/01/2006	12/31/2006	n/a	\$13,123.00
<a href="#">Health Reimbursement (HRA)</a>	ABC Company	01/01/2006	12/31/2006	03/01/2007	\$1,001.30

### Other Active Accounts

Account	Group Name	Start	End	Submit by	Balance
<a href="#">FSA (dependent care)</a>	ABC Company	01/01/2006	12/31/2006	03/01/2007	\$3,500.00
<a href="#">Transit Passes</a>	ABC Company	01/01/2006	12/31/2006	03/01/2007	\$125.00

### Inactive Accounts

Account	Group Name	Start	End
<a href="#">FSA (medical)</a>	ABC Company	01/01/2005	12/31/2005
<a href="#">FSA (dependent care)</a>	ABC Company	01/01/2005	12/31/2005
<a href="#">Transit Passes</a>	ABC Company	01/01/2005	12/31/2005
<a href="#">FSA (medical)</a>	ABC Company	01/01/2005	12/31/2005
<a href="#">FSA (dependent care)</a>	ABC Company	01/01/2005	12/31/2005
<a href="#">Transit Passes</a>	ABC Company	01/01/2005	12/31/2005

#### Ways to save time

- [Medical Crossover](#)
- [Dental Crossover](#)
- [Direct deposit](#)

#### Make your money work for you

- [Set up a Basic Investment Account for your HSA money](#)

#### More tools

- [Account planning](#)
- [2007 Open Enrollment Tools](#)

### Maximums & Deductibles

Max. medical costs (in network) **\$1,525.00**  
 Max. medical costs (out of network) **\$3,500.00**  
 Deductibles to date: **\$475.00**  
 Deductible maximum: **\$2,000.00**  
[Explain these ?](#)

### Medical reimbursement accounts

**Total Available Balance: \$14,124.30**

Account	Balance
<a href="#">Flexible Spending (FSA)</a>	<b>\$0.00</b>
<a href="#">Health Savings (HSA)</a>	\$13,123.00
<a href="#">Health Reimbursement (HRA)</a>	\$1,001.30

**Total Medical Balance: \$14,224.30**  
**Pending Requests: \$100.00**

### My total medical expenses

**So far this year \$1,354.68**  
 So far this month \$43.13  
 Last month \$567.25

### Search accounts

Current plan year (2006)

From:   to

Account(s):

Status:

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## My FSA

Current available balance: **\$0.00**

Plan: ABC Company XX123X (01/01/2006 - 12/31/2006)

Send claims by: 03/01/2007

Direct deposit reimbursement: [?](#) Yes | [change](#)  
 Automatic medical/Rx reimbursements: [?](#) Yes | [change](#)  
 Automatic dental reimbursements: [?](#) Yes | [change](#)

**Election amount:** \$2,000.00  
**Reimbursements:** \$2,000.00  
**Requests pending:** \$0.00  
**Available balance:** **\$0.00**

### Request Summary

Total submitted: \$5,203.00  
 Paid: \$2,000.00  
 Pending: \$0.00  
 Denied: \$3,203.00

## Maximums & Deductibles

**Max. medical costs (in network)** \$1,525.00  
 Max. medical costs (out of network) \$3,500.00  
**Deductibles to date:** \$475.00  
 Deductible maximum: \$2,000.00  
[Explain these](#) [?](#)

## Medical reimbursement accounts

**Total Available Balance:** \$14,124.30

Account	Balance
<a href="#">Flexible Spending (FSA)</a>	<b>\$0.00</b>
<a href="#">Health Savings (HSA)</a>	\$13,123.00
<a href="#">Health Reimbursement (HRA)</a>	\$1,001.30
<b>Total Medical Balance:</b>	<b>\$14,224.30</b>
<b>Pending Requests:</b>	<b>\$100.00</b>

## Transactions

## Requests

Search from:   to

Date	#	Description	Contribution	Reimbursement	Balance
10/12/2006	ACH	Direct Deposit <a href="#">details</a>		\$18.85	<b>\$0.00</b>
10/05/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$18.85
09/15/2006	ACH	Direct Deposit <a href="#">details</a>		\$100.00	\$38.85
09/01/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$138.85
08/20/2006	ACH	Direct Deposit <a href="#">details</a>		\$120.00	\$158.85
08/05/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$278.85
07/31/2006	ACH	Direct Deposit <a href="#">details</a>		\$120.00	\$298.85
07/28/2006	ACH	Direct Deposit <a href="#">details</a>		\$7.15	\$418.85
07/15/2006	ACH	Direct Deposit <a href="#">details</a>		\$120.00	\$426.00
07/05/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$546.00
07/01/2006		Employee	\$100.00		\$566.00
06/25/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$466.00

[next >](#)

## My total medical expenses

**So far this year** \$1,354.68  
 So far this month \$43.13  
 Last month \$567.25

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## My FSA

Plan: ABC Company XX123X (01/01/2006 - 12/31/2006)

Send claims by: 03/01/2007

**Election amount: \$2,000.00**  
**Reimbursements: \$2,000.00**  
**Requests pending: \$0.00**  
**Available balance: \$0.00**

**Current available balance: \$0.00**

Direct deposit reimbursement: ? Yes | [change](#)  
 Automatic medical/Rx reimbursements: ? Yes | [change](#)  
 Automatic dental reimbursements: ? Yes | [change](#)

### Request Summary

Total submitted: \$5,203.00  
 Paid: \$2,000.00  
 Pending: \$0.00  
 Denied: \$3,203.00

## Maximums & Deductibles

**Max. medical costs (in network) \$1,525.00**  
 Max. medical costs (out of network) \$3,500.00  
**Deductibles to date: \$475.00**  
 Deductible maximum: \$2,000.00  
[Explain these ?](#)

## Medical reimbursement accounts

**Total Available Balance: \$14,124.30**

Account	Balance
<a href="#">Flexible Spending (FSA)</a>	<b>\$0.00</b>
<a href="#">Health Savings (HSA)</a>	\$13,123.00
<a href="#">Health Reimbursement (HRA)</a>	\$1,001.30

**Total Medical Balance: \$14,224.30**  
**Pending Requests: \$100.00**

## My total medical expenses

**So far this year \$1,354.68**  
 So far this month \$43.13  
 Last month \$567.25

## Transactions

## Requests

Search from:  to

<a href="#">Request</a>	<a href="#">Last Process Date</a>	<a href="#">Reimbursement for</a>	<a href="#">Medical/Rx Claim date(s)</a>	<a href="#">Total Requested</a>	<a href="#">Total Reimbursed</a>	<a href="#">Status</a>
<a href="#">6750805</a>	10/12/2006	Rx Center (Co-pay)	10/12/2006	\$18.85	n/a	Pending
<a href="#">6750805</a>	10/05/2006	Medical Clinic (Co-pay)	10/12/2006	\$20.00	n/a	In process
<a href="#">6750805</a>	09/15/2006	Specialty Clinic (C-P, Ded.)	12/01/2006-12/02/2006	\$420.00	\$420.00	Paid
<a href="#">6750805</a>	09/01/2006	Rx Center (Co-pay)	09/01/2006	\$20.00	\$20.00	Paid
<a href="#">6750805</a>	08/20/2006	Medical Clinic (C-P, Ded)	08/20/2006	\$120.00	\$120.00	Paid
<a href="#">6750805</a>	08/05/2006	Rx Center (Co-pay)	08/05/2006	\$20.00	\$20.00	Paid
<a href="#">6750805</a>	07/31/2006	Dr. Jones (C-P, Ded.)	07/31/2006	\$120.00	\$120.00	Paid
<a href="#">6750805</a>	07/28/2006	Rx Center (Co-pay)	07/28/2006	\$7.15	\$7.15	Paid
<a href="#">6750805</a>	07/15/2006	Dr. Jones (C-P, Ded.)	07/15/2006	\$120.00	\$120.00	Paid
<a href="#">6750805</a>	07/05/2006	Rx Center (Co-pay)	07/05/2006	\$20.00	\$20.00	Paid
<a href="#">6750805</a>	07/01/2006	Rx Center (Co-pay)	07/01/2006	\$20.00	\$20.00	Paid
<a href="#">6750805</a>	06/25/2006	Rx Center (Co-pay)	06/25/2006	\$20.00	\$20.00	Paid

[next page >>](#)



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## My HSA

Plan: ABC Company XX123X (01/01/2006 - 12/31/2006)

**Contributions:** \$20,000.00  
**Reimbursements:** \$6,876.00  
**Requests pending:** \$0.00  
**Available HSA balance:** \$13,123.00

**Current available balance: \$13,123.00**

Direct deposit reimbursement: ? Yes | [change](#)  
 Direct contribution: ? Yes | [change](#)  
 Automatic medical/Rx reimbursements: ? Yes | [change](#)  
 Automatic dental reimbursements: ? Yes | [change](#)

### Request Summary

Total submitted: \$5,203.00  
 Paid: \$2,000.00  
 Pending: \$0.00  
 Denied: \$3,203.00

## Maximums & Deductibles

**Max. medical costs (in network)** \$1,525.00  
 Max. medical costs (out of network) \$3,500.00  
**Deductibles to date:** \$475.00  
 Deductible maximum: \$2,000.00  
[Explain these ?](#)

## Medical reimbursement accounts

**Total Available Balance: \$14,124.30**

Account	Balance
<a href="#">Flexible Spending (FSA)</a>	\$0.00
<a href="#">Health Savings (HSA)</a>	\$13,123.00
<a href="#">Health Reimbursement (HRA)</a>	\$1,001.30
<b>Total Medical Balance:</b>	<b>\$14,224.30</b>
<b>Pending Requests:</b>	<b>\$100.00</b>

## Transactions

## Requests

Search from:  to

Date	#	Description	Contribution	Reimbursement	Balance
10/12/2006	ACH	Direct Deposit <a href="#">details</a>		\$18.85	\$0.00
10/05/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$18.85
09/15/2006	ACH	Direct Deposit <a href="#">details</a>		\$100.00	\$38.85
09/01/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$138.85
08/20/2006	ACH	Direct Deposit <a href="#">details</a>		\$120.00	\$158.85
08/05/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$278.85
07/31/2006	ACH	Direct Deposit <a href="#">details</a>		\$120.00	\$298.85
07/28/2006	ACH	Direct Deposit <a href="#">details</a>		\$7.15	\$418.85
07/15/2006	ACH	Direct Deposit <a href="#">details</a>		\$120.00	\$426.00
07/05/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$546.00
07/01/2006		Employee	\$100.00		\$566.00
06/25/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$466.00

[next >](#)

## My total medical expenses

**So far this year** \$1,354.68  
 So far this month \$43.13  
 Last month \$567.25

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## My HSA

Plan: ABC Company XX123X (01/01/2006 - 12/31/2006)

**Contributions:** **\$20,000.00**  
**Reimbursements:** **\$6,876.00**  
**Requests pending:** **\$0.00**  
**Available HSA balance:** **\$13,123.00**  
**Investment balance:** **\$5,355.83**  
**Total HSA balance:** **\$18,477.83**

**Current available balance: \$13,123.00**

Direct deposit reimbursement: [?](#) Yes | [change](#)  
 Direct contribution: [?](#) Yes | [change](#)  
 Automatic medical/Rx reimbursements: [?](#) Yes | [change](#)  
 Automatic dental reimbursements: [?](#) Yes | [change](#)

### Investment Account (as of 10/01/2006)

Investment balance: \$5,354.83  
 Minimum HSA balance: \$2,500.00  
 % of future HSA [?](#) contributions to invest: 5% | [change](#)

### Request Summary

Total submitted: \$5,203.00  
 Paid: \$2,000.00  
 Pending: \$0.00  
 Denied: \$3,203.00

## Maximums & Deductibles

**Max. medical costs (in network)** **\$1,525.00**  
 Max. medical costs (out of network) **\$3,500.00**  
**Deductibles to date:** **\$475.00**  
 Deductible maximum: **\$2,000.00**  
[Explain these](#) [?](#)

## Medical reimbursement accounts

**Total Available Balance: \$14,124.30**

Account	Balance
<a href="#">Flexible Spending (FSA)</a>	<b>\$0.00</b>
<a href="#">Health Savings (HSA)</a>	\$13,123.00
<a href="#">Health Reimbursement (HRA)</a>	\$1,001.30

**Total Account Balance:** **\$19,589.13**  
**HSA Investment Balance:** **\$5,355.83**  
**Pending Requests:** **\$100.00**

## Total medical expenses

**So far this year:** **\$1,354.68**  
 So far this month: \$43.13  
 Last month: \$567.25

**NOTE: Integrating investment account information dependent on HOW account works. Reimbursement summary shown assuming that investment account transfers are not automatic. If transfers FROM account are automatic the HSA available balance should include it.**

## Transactions

## Requests

Search from:  to

Date	#	Description	Contribution	Reimbursement	Balance
10/12/2006	ACH	Direct Deposit <a href="#">details</a>		\$18.85	<b>\$0.00</b>
10/05/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$18.85
09/15/2006	ACH	Direct Deposit <a href="#">details</a>		\$100.00	\$38.85
09/01/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$138.85
08/20/2006	ACH	Direct Deposit <a href="#">details</a>		\$120.00	\$158.85
08/05/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$278.85
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07/28/2006	ACH	Direct Deposit <a href="#">details</a>		\$7.15	\$418.85
07/15/2006	ACH	Direct Deposit <a href="#">details</a>		\$120.00	\$426.00
07/05/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$546.00
07/01/2006		Employee	\$100.00		\$566.00
06/25/2006	ACH	Direct Deposit <a href="#">details</a>		\$20.00	\$466.00

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## My Plans

[full plan details \(SPD\)](#)

Plan: ABC Company XX123X (01/01/2006 - 12/31/2006) Type: Subscriber & spouse

### Covered members:

Harry Schwam (01/01/1932) ID: XXX ##### 00 Relationship: Subscriber

Rose Schwam (01/01/1938) ID: XXX ##### 00 Relationship: Spouse

Plan dates: (01/01/2006-12/31/2006)

Address: 123 Main St. Daytime phone: (651) 555-1212  
Eagan, MN 55122 E-mail address: rosieschwam44@aol.com

Primary care provider: Medical clinic [primary care provider \(PCC\) history](#)

Primary information: xxxxx [find a doctor](#)

Sub ID	Plan	Type
XX123-XX	<a href="#">ABC Company (01/01/2006 - 12/31/2006; XXX123X)</a>	Subscriber & spouse
XX123-XX	<a href="#">ABC Company (01/01/2005 - 12/31/2005; XXX123X)</a>	Subscriber & spouse
XX123-XX	<a href="#">ABC Company (01/01/2004 - 12/31/2004; XXX123X)</a>	Subscriber & spouse
XX123-XX	<a href="#">ABC Company (01/01/2003 - 12/31/2003; XXX123X)</a>	Subscriber & spouse

### Maximums & Deductibles

Max. medical costs (in network) **\$1,525.00**

Max. medical costs (out of network) \$3,500.00

Deductibles to date: **\$475.00**

Deductible maximum: **\$2,000.00**

[Explain these](#)

### Medical reimbursement accounts

Total Available Balance: **\$14,124.30**

Account	Balance
<a href="#">Flexible Spending (FSA)</a>	<b>\$0.00</b>
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<a href="#">Health Reimbursement (HRA)</a>	\$1,001.30

Total Account Balance: **\$19,589.13**

HSA Investment Balance: **\$5,355.83**

Pending Requests: **\$100.00**

### Total medical expenses

So far this year: **\$1,354.68**

So far this month: \$43.13

Last month: \$567.25

### Deductibles & Maximums

**Deductibles & Maximums information goes here**

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## My Plans

[full plan details \(SPD\)](#)

Plan: ABC Company XX123X (01/01/2006 - 12/31/2006) Type: Subscriber & spouse

### Covered members:

<input type="checkbox"/>	Harry Schwam (01/01/1932)	ID: XXX ##### 00	Relationship: Subscriber
<input type="checkbox"/>	Rose Schwam (01/01/1938)	ID: XXX ##### 00	Relationship: Subscriber

### Maximums & Deductibles

#### Maximums & Deductibles

**Max. medical costs (in network)\*** **\$1,525.00**  
 Max. medical costs (out of network)\* \$3,500.00

**Deductibles to date:** **\$475.00**  
 Deductible maximum: **\$2,000.00**

\* Excludes Co-pays

### Maximums & Deductibles

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[Explain these](#)

### Medical reimbursement accounts

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**HSA Investment Balance:** **\$5,355.83**  
**Pending Requests:** **\$100.00**

### Total medical expenses

**So far this year:** **\$1,354.68**  
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 Last month: \$567.25