How do You and Your Insurer Share Costs using Copays and Coinsurance?

**Copays**
A copay is the fixed dollar amount (for example: $40) that you pay for certain services, such as physician office visits and prescription drugs. This amount can differ depending on the type of covered healthcare service.

**Coinsurance**
Coinsurance is the percentage of the allowed amount or the percentage of the maximum amount for a covered healthcare service that you are responsible for paying (for example: 20%).

Some insurance plans require you to meet the calendar year deductible **before** paying coinsurance. The calendar year deductible is the amount you pay each January through December before your plan begins paying for certain medical services. Once you meet the calendar year deductible, coinsurance payments will begin.

For instance, you go to an in-network hospital for a covered healthcare service. The allowed amount for this service is $1,000. You are responsible for paying 20% coinsurance or $200 of the allowed amount. Your insurance plan will pay the remaining 80% coinsurance or $800 of the allowed amount.

---

**John’s Plan**
- **Allowed Amount:** $10,000
- **Coinsurance:** 20%

John pays 20% ($2,000)

John’s Plan pays 80% ($8,000)

---

**Anna’s Plan**
- **Allowed Amount:** $8,000
- **Coinsurance:** 30%

Anna pays 30% ($2,400)

Anna’s Plan pays 70% ($5,600)

---

John was having some trouble with his gall bladder, so he went to an in-network hospital and stayed for 3 days and 3 nights. His plan pays some of the allowed amount for his hospital stay.

Anna recently had knee surgery. She went to a Physical Therapist for 6 months. Her plan pays some of the allowed amount for her Physical Therapy visits.

---

*BlueCross BlueShield of Alabama*

We cover what matters.

An Independent Licensee of the Blue Cross and Blue Shield Association