

Table 1

Month	Expense Type	Actual w/ SM	Hypothetical w/ HMO/HSA (\$3000/\$6000 deductible)	Savings/Loss		
<b>November</b>	Sharing	\$530.00	\$845.00	-\$315.00		
	Initiation Fee	\$200.00		-\$115.00		
	Administrative Fee	\$15.00		-\$100.00		
	DPC Doc Fee	\$110.00		\$10.00		
	Z	\$4.68	\$35.51	-\$20.83		
	Zm	\$24.70	\$147.33	-\$143.46		
	M	\$13.18	\$46.08	-\$176.36		
	T	\$43.04	\$43.04	-\$176.36		
	Imaging Tests	\$826.20	\$165.24	\$484.60		
<b>December</b>	Sharing	\$530.00	\$845.00	\$169.60		
	DPC Doc Fee	\$110.00		\$279.60		
	Z/Ph	\$36.26	\$150.00	\$165.86		
<b>January</b>	Sharing	\$577.50	\$845.00	-\$101.64		
	DPC Doc Fee	\$110.00		\$8.36		
	Z	\$1.00	\$10.00	-\$0.64		
	Zm	\$25.00	\$240.00	-\$215.64		
	Z	\$13.20	\$13.20	-\$215.64		
<b>February</b>	Sharing	\$306.59	\$845.00	-\$754.05		
	Reimbursement from Imaging	-\$590.32		-\$1344.37		
	DPC Doc Fee	\$110.00		-\$1234.37		
	D/C	\$27.24	\$27.24	-\$1234.37		
	Zm	\$126.10	\$240.00	-\$1348.27		
		Sharing	\$574.51	\$845.00	-\$1618.76	
<b>March</b>	DPC Doc Fee	\$110.00		-\$1508.76		
	F	\$34.24	\$34.24	-\$1508.76		
	In/N	\$79.00	\$100.00	-\$1529.76		
		Sharing	\$575.52	\$845.00	-\$1799.24	
<b>April</b>	DPC Doc Fee	\$110.00		-\$1689.24		
	Zm	\$63.05	\$120.00	-\$1746.19		
	M	\$4.94	\$23.00	-\$1764.25		
		Sharing	\$573.88	\$845.00	-\$2035.37	
<b>May</b>	DPC Doc Fee	\$110.00		-\$1925.37		
		Sharing	\$567.32	\$845.00	-\$2203.05	
<b>June</b>	DPC Doc Fee	\$110.00		-\$2093.05		
		Sharing	\$569.66	\$845.00	-\$2368.39	
<b>July</b>	DPC Doc Fee	\$110.00		-\$2258.39		
	Zm	\$31.53	\$60.00	-\$2286.86		
	Z	\$4.68	\$4.68	-\$2286.86		

Month	Expense Type	Actual w/ SM	Hypothetical w/ HMO/HSA (\$3000/\$6000 deductible)	Savings/Loss		
	S	\$3.60	\$4.00	-\$2287.26		
	Zm	\$126.70	\$240.00	-\$2400.56		
	M	\$18.68	\$92.00	-\$2473.88		
<b>August</b>	Sharing	\$560.91	\$845.00	-\$2757.97		
	DPC Doc Fee	\$110.00		-\$2647.97		
	A	\$49.49	\$50.00	-\$2648.48		
	CI	\$10.81	\$15.00	-\$2652.67		
	Z	\$9.36	\$9.36	-\$2652.67		
	M	\$28.02	\$92.00	-\$2716.65		
	Zm	\$109.78	\$360.00	-\$2966.87		
	Lab work CBC/ CMP/FreeT4/TSH/ FSH/Prolactin/ IGF-1/IgA/	\$111.00	\$125.00	-\$2980.87		
	X-ray	\$50.00	\$50.00	-\$2980.87		
	Specialist visit	\$200.00	\$25.00	-\$2805.87		
<b>September</b>	Sharing	\$542.00	\$845.00	-\$2951.48		
	DPC Doc Fee	\$110.00		-\$2841.48		
<b>October</b>	Sharing	\$536.97	\$845.00	-\$3149.51		
	DPC Doc Fee	\$110.00		-\$3039.51		
<b>November</b>	Sharing	\$545.00	\$845.00	-\$3339.51		
	DPC Doc Fee	\$110.00		-\$3229.51		