

INSURANCE GLOSSARY OF TERMS

HEALTH INSURANCE:

a type of insurance coverage that pays for medical & surgical expenses incurred by the insured

PREMIUM:

the amount you pay to purchase your coverage, sometimes the cost is shared by the employer

DEDUCTIBLE:

the amount that you pay for health care services before insurance begins to pay (out-of-pocket expense)

CO-PAY:

a small fixed amount paid for services to providers by the insurance company

CO-INSURANCE:

a percentage of the fee that the policy holder must pay after the deductible has been met (example: 30% coinsurance =

insurance company pays 70% of the bill & the policy holder is responsible for the other 30%)

CLAIM:

a bill for services from a hospital, doctor's office, laboratory, etc. sent to the insurance company requesting payment to the provider

EOB (Explanation of Benefits):

this is not a bill

the EOB explains the provider's fee for a service, how much the insurance company will pay & the potential remainder the patient may be responsible for paying

OUT-OF-POCKET MAXIMUM:

the most the policy holder will have to pay each year for covered services before insurance pays 100% of covered benefits

PRE-AUTHORIZATION:

the insurance company must give permission for certain tests/procedures in order for it to be covered by the insurance company

STUDENT HEALTH INSURANCE BASICS

LYCOMING COLLEGE

When planning for college few people plan to be sick.
Unfortunately, injuries & illness do occur and although generally a healthy group, most college students at some point will need a strep or mono test, x-ray for a twisted ankle, etc.
Planning ahead can make the process of getting the right care a little easier.

Types of insurance plans:

- HMO- Health Maintenance Organization Delivers services via a network of providers
 - less freedom to choose providers
 - usually more preventative care benefits
- <u>services obtained outside the network not</u> covered
- patients choose a primary care provider (PCP) to coordinate care
 - typically lower or no deductibles
 - pay a copay for services
- •PPO- Preferred Provider Organization
 Delivers services via a network but also allows
 patients to go out of the network at a higher
 cost
 - more freedom to choose providers
- usually higher out of pocket expenses compared to HMO
- use of in-network/ out-of-network options
- •POS- Point of Service Blend of PPO/HMO
 - more freedom to choose provider
- out of pocket expenses controlled by the patient
 - PCC coordinates in-network care
- •High Deductible Health Plan with Health Savings Account (HSA)
- higher out of pocket costs but when the max is reached the plan pays 100%
- HSA money put into a separate account before taxes that is used only for health care
- preventative care is free even if the deductible hasn't been met
- •Indemnity Plan/ Fee for services or reimbursement plan

Patients may see any doctor at any time.

Patients pay the provider directly then submit a claim to the insurance company who will reimburse the patient part or all of the cost

- usually does not cover preventative care
- premiums are usually higher

PARENT/STUDENT CHECKLIST:

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√ensure your son/daughter has a current copy of his/her insurance card

√ensure both you and your student know the type of insurance you have and how it works:

- what kind of plan do you have? (HMO, PPO, POS)
- do you have a deductible? how much?
- do you have a copay? how much for DR/ER visit?
- does your plan have a coinsurance? how much?
- does your plan utilize networks?

Will your student be in-network or out-of- network while away at school? Some plans offer an out-of-network rider or exemption for students out-of-network while away at school but this must be arranged ahead of time with your insurance company, so call early!

√establish how your son/daughter can find answers about his/her insurance such as networks and services covered (call home to parents, insurance company phone number, insurance company website)

√create a budget- set aside funds your son/daughter know are available for health care needs such as copays and medications, as well as money needed toward any deductible you may have.

√establish communication guidelines- do you want called before your son/daughter heads to the ER or has a strep test done to ensure it will be covered by your insurance or have you set aside sufficient funds if you are left with any outstanding bills?

"The time to repair the roof is when the sun is shining."
-John F. Kennedy