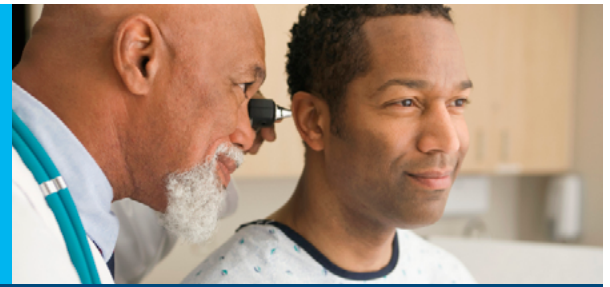


VitaMin



Vital health information in a minute

LEARN HEALTH PLAN LINGO

When you get to know the basics of how health plans work, you'll be better prepared to manage your health care and your costs. Let's get started with a few of the most important terms to know.

Glossary of terms:



Premium: The cost for health plan coverage, usually paid monthly. If you have a health plan through work, the premium may be shared by you and your employer. If your employer funds its employee health benefit, your portion of the plan cost may be called the "plan contribution".



Coinsurance: A set percentage of costs you pay for covered health services after you meet the deductible. You may get a bill for your share of the costs after your visit. The plan pays the rest of covered charges. Coinsurance does not include copayments.



Deductible: The amount you pay before your plan begins to pay your covered health care expenses. For example, if your plan's deductible is \$2,000, you'll pay the full cost for eligible health services up to \$2,000. Then, your plan begins to pay.



Out-of-pocket maximum: The limit you pay for covered services each plan year. Once you have met the out-of-pocket maximum, your plan pays 100% of covered services for the remainder of the coverage period. This limit does not include the money you pay for premiums or health care services not covered under the health plan.



Copay or copayment: A fixed dollar amount you may pay each time you visit the doctor's office, urgent care clinic, ER or pharmacy. Usually, you pay the copay when you receive the service. The amount can vary by plan.



Explanation of benefits (EOB): After you visit the doctor, you'll get a statement from your health plan called an EOB. It outlines the services you received and the costs paid by your plan. It also shows the amount you're responsible to pay. An EOB is not a bill, but the amounts shown should match up with the amounts on any bills from medical providers.

This information is for educational purposes only. It is not intended as financial or medical advice. Review your plan documents or consult a licensed insurance agent if you have questions about your specific health plan. If there are any differences between this information and the information contained in your plan documents, the information in your plan documents will prevail.



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