

FREQUENTLY ASKED QUESTIONS: INSURANCE

What is a copayment?

A copayment is a set fee you pay each time you receive a certain service. Some services or health plans do not have copayments.

What is coinsurance?

Coinsurance is the percentage of the allowed amount you pay as your share of the bill. For example, if your health plan pays 80 percent, then 20 percent would be your coinsurance.

What is a deductible?

The amount, if any, you are responsible for paying before any amount is payable under your health plan. You must pay this to your provider. We credit you as having paid your deductible on the claims you and providers send to us. Payment of claims begins once you meet the deductible. Deductibles and coinsurance start over with each new benefit period.

What is out of pocket?

The highest total amount of coinsurance you will have to pay during a benefit period. If you reach your out-of-pocket amount and deductible limits, we pay covered expenses in full for the rest of the benefit period, minus any copayments.

What is a Service Max?

A service max is the maximum amount that will be paid for a service in the same benefit period.

What is meant by Service Days?

Service Days apply to services that have limits on the number of visits available to the member as a covered during a benefit period. An example may be the number of visits to see a chiropractor in one benefit period.