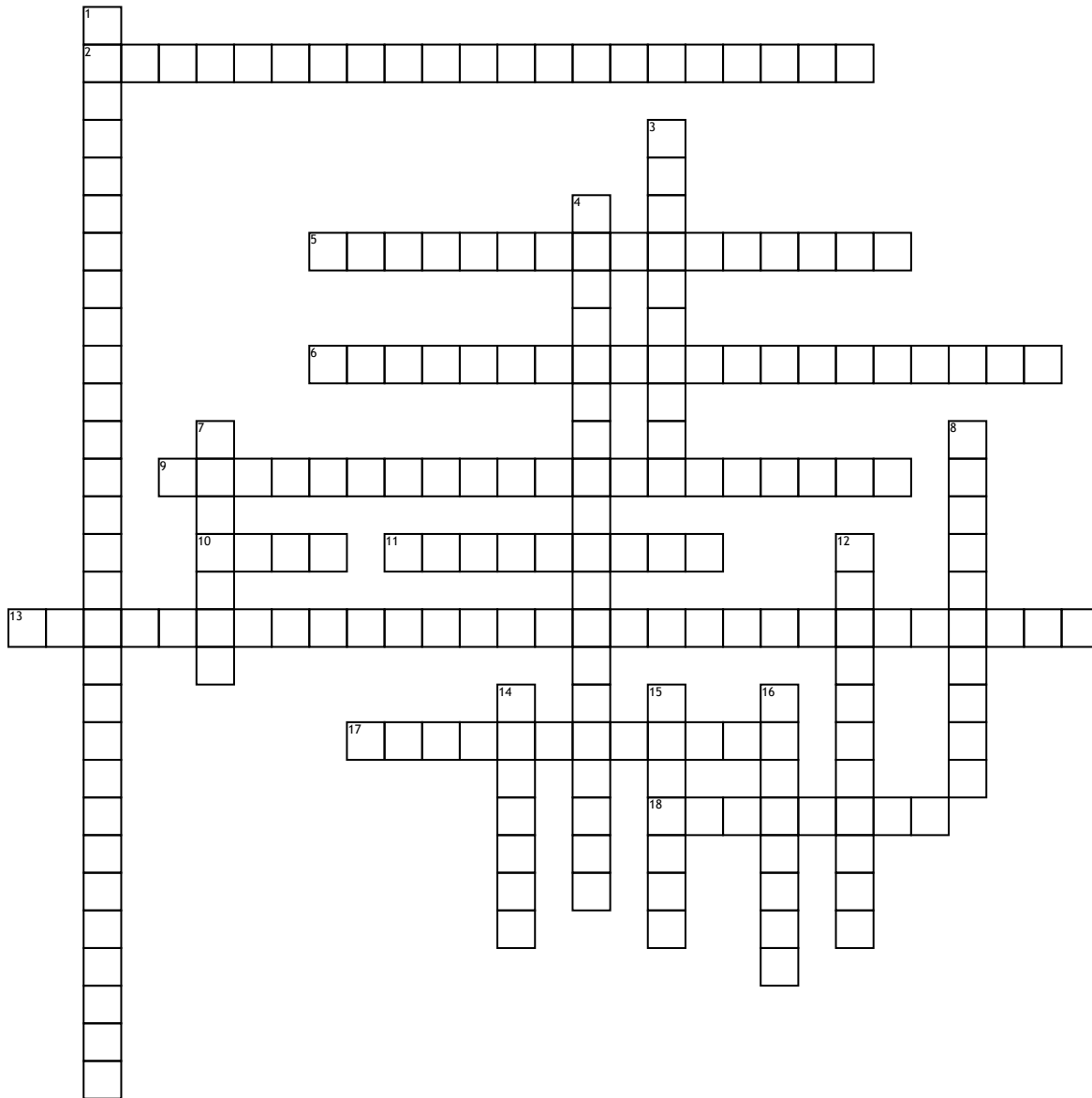


Name: _____

Date: _____

Insurance Vocab



Across

2. a statement sent by a health insurance company to covered individuals explaining what medical treatments were paid for on their behalf.

5. decision by your health insurer or plan that a health care service, treatment plan, prescription drug or durable medical equipment is medically necessary.

6. is an agreement that transfers the insurance claims rights or benefits of the policy to a third-party.

9. a medical condition that started before a person's health insurance went into effect.

10. provides low-cost health coverage to children in families that earn too much money to qualify for Medicaid.

11. a payment made by a beneficiary in addition to that made by an insurer.

13. a medical care arrangement in which medical professionals and facilities provide services to subscribed clients at reduced rates.

17. falls first in a calendar year is the parent with the primary coverage for the dependent.

18. helps with medical costs for some people with limited income and resources.

Down

1. a health maintenance organization is a medical insurance group that provides health services for a fixed annual fee.

3. it pays a set amount for each enrolled person assigned to them, per period of time, whether or not that person seeks care.

4. medical benefits to employees injured in the course of employment

7. a health care program of the United States Department of Defense Military Health System.

8. able to be deducted, especially from taxable income or tax to be paid.

12. is the percentage of costs you pay after you've met your deductible.

14. The Civilian Health and Medical Program of the Department of Veterans Affairs

15. an amount to be paid for an insurance policy.

16. a federal health insurance program that pays for a variety of health care expenses.