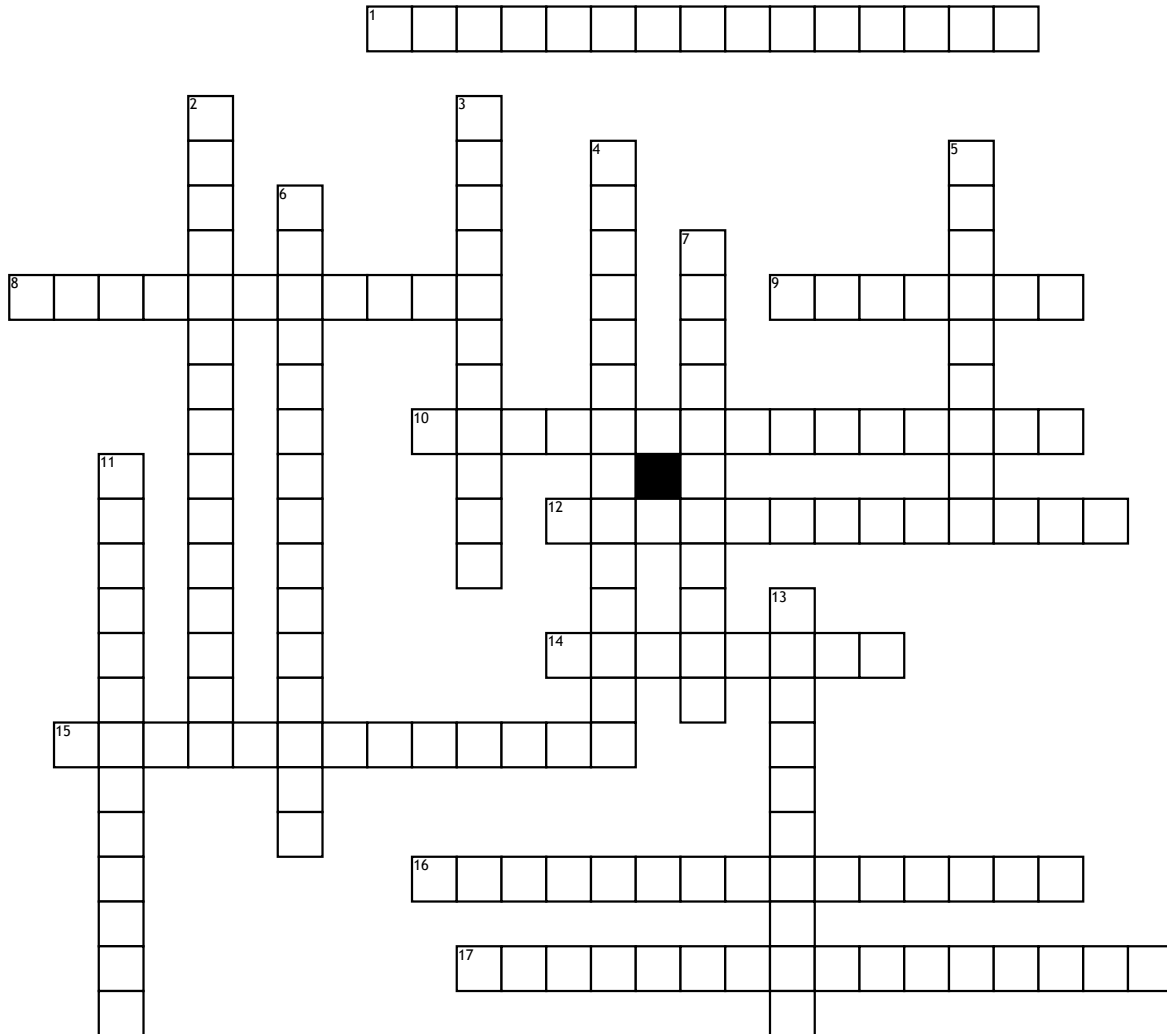


ch 3



Across

- 1. A plan offered through employers, associations, or unions who pay claims out of their own funds instead of funding claims through an insurer.
- 8. The primary geographical area of coverage and service provided by a Health Maintenance Organization (HMO).
- 9. A person applying for coverage through an indemnity provider.
- 10. Provides benefits for accidental injuries associated with specific events, such as traveling out of the country or on a common carrier.
- 12. Portion of a premium for which protection has already been given
- 14. The maximum a policy will pay for covered losses per claim
- 15. The maximum a policy will pay for covered losses during the lifetime of an insured

- 16. Provides specific benefits for a specified sickness, such as Cancer Plans and Heart Disease Plans.
 - 17. A health plan with limits for what will be paid for covered expenses. These plans are most associated with covering day-to-day losses based on a specified or flat dollar amount. Scheduled benefit plans are not designed to cover catastrophic losses and have limited annual benefits.
- Down**
- 2. covers a debtor, with the creditor receiving benefits to pay the debt if the debtor becomes disabled as defined in the policy. The policy usually provides for the payment of required minimum monthly payments for up to two years.
 - 3. The maximum a policy will pay for covered losses per year

- 4. - Maximum dollar limit set, with no itemizing of costs, used for groups covered under a blanket policy for a specified period or event
- 5. temporary coverage that provides limited benefits for a short period of time period, typically 30 days - 12 months.
- 6. Portion of a premium for which policy protection has not yet been given
- 7. Services covering dental pulp care and root canals
- 11. The insured can choose any doctor or hospital without referrals or a primary care physician. The plan requires the insured to pay up front for services, and then submit a claim for reimbursement. The insurer will pay benefits directly to the insured as specified in the policy, up to the amount of expenses incurred. Indemnity plans are generally marketed through commercial insurers.
- 13. A person applying for coverage through a service provider.