What every person should know about their insurance plan

Fill in the blanks, and refer back to this when you seek care, or use it to compare plans.

Service	Copay	Deductible	Coinsurance	Preferred Facilities
Problem visit	$	$	%	
Well visit	$	$	%	
Surgery	$	$	%	
Specialist	$	$	%	
Urgent care	$	$	%	
Emergency	$	$	%	
Lab	$	$	%	
X-ray	$	$	%	
Medication	$	$	%	
Out-of-pocket maximum: $				
Billing period From (month/day): Until (month/day):				
Comments:				

Here are standard definitions that apply to most plans, check with your plan for confirmation:

- **Copay**: dollar amount you need to pay at time of each visit/service
- **Deductible**: amount you need to pay on bills before any of your insurance kicks in.
- **Coinsurance**: percentage you need to pay after your deductible is reached. This could be 20%, 50%, 80%.... You will pay this percentage until your "out-of-pocket maximum" is reached, at which point you shouldn't owe any further money until the end of your billing year.
- **Preferred facility**: services will tend to cost less at preferred facilities. Typically, your copay or coinsurance will be higher at non-preferred facilities. Note this in your comments field if applicable.
- **Out-of-pocket maximum:** this is the total maximum amount that you would ever have to pay in addition to your premiums in a billing period (see below).
- **Billing period:** usually a year, typically a calendar year (Jan 1 thru Dec 31), or an insurance initiation year (resets yearly on the Month/Day that you signed up for the plan). Generally, at the end of your billing period your deductibles and out-of-pocket maximums will reset.
- Important note: **"surgery"** typically includes ALL physical procedures performed by a doctor, whether treating warts, reducing a dislocated elbow, or pulling a raisin from an ear.

When selecting an insurance plan: Consider that the above costs can greatly exceed the amounts you pay for your premiums in some cases. What is your worst case scenario (year of premiums + out of pocket maximum)? What is your typical scenario (a few copays, some or all of your deductible, etc)? Also, how much hassle is the insurance company? Lots of restrictions and prior authorizations, or do they let you do what you need? Are there quality pediatric services nearby within your network? The best three hospitals for kids are Emanuel, OHSU, and St. Vincent Medical Center. Providence's east side location doesn't specialize in kids, except for their developmental center.