Glossary Of Health Coverage And Medical Terms

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Glossary of Health Coverage and Medical Terms. Page 3 of 4. A benefit your employer, union or other group sponsor provides to you to pay for your health care services. Preauthorization. A decision by your health insurer or plan that a health care service, treatment plan, prescription drug or durable medical equipment is medically necessary. Sometimes

Health coverage issued to you directly (individual plan) or through an employer, union or other group sponsor (employer group plan) that provides coverage for certain health care costs. Also called "health insurance plan", "policy", "health insurance policy" or "health insurance". Preauthorization.
terminology that is commonly used. The definitions of more common terms listed below come from the Employee Benefits Security Administration.

**Glossary of health coverage and medical terms - MercyCare**

Health Coverage Legal entitlement to payment or reimbursement for your health care costs, generally under a contract with a health insurance company, a group health plan offered in connection with employment, or a government program like Medicare, Medicaid, or the Children’s Health Insurance Program (CHIP).

**Health Coverage - HealthCare.gov Glossary | HealthCare.gov**

Full glossary of health insurance terms. Includes: claim, coinsurance, copayment, deductible, in-network, out-of-pocket, premium and more.

**Glossary of Health Insurance Terms | Blue Cross and Blue ...**

Health care services or supplies needed to prevent, diagnose, or treat an illness, injury, condition, disease or its symptoms and that meet accepted standards of medicine. Network. The facilities, providers, and suppliers your health insurer or plan has contracted with to provide health care services. Non-Preferred Provider

**DIFS - Glossary of Health Coverage and Medical Terms**

Glossary of Health Coverage & Medical Terms. This glossary has many commonly used terms, but isn’t a full list. These glossary terms and definitions are intended to be educational and may be different from the terms and definitions in your plan. Some of these terms also might not have exactly the same meaning when used in your policy or plan, and in any such case, the policy or plan governs.

**Glossary of Health Coverage & Medical Terms**

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**Glossary of Health Coverage and Medical Terms**

A health care reimbursement model in which a health insurance plan agrees to pay a doctor, hospital, lab or other health care provider a flat amount per enrolled patient, no matter how many services patients require. The payment amount is set in a contract between the health plan and providers or groups of providers.

**Health insurance terms glossary**


**Glossary | HealthCare.gov**

Provides coverage for only certain specified health care services or treatments or provides coverage for health care services or treatments for a certain amount during a specified period. -M-Mandated benefit — A requirement in state or federal law that all health insurance policies provide coverage for a specific health care service. Medicaid

**Glossary of Health Insurance Terms**
SBC Glossary of Health Coverage & Medical Terms: This glossary has many commonly used terms, but isn’t a full list. These glossary terms and definitions are intended to be educational and may be different from the terms and definitions in your plan.

**SBC Glossary of Health Coverage & Medical Terms**
A decision by your health insurer or plan that a health care service, treatment plan, prescription drug or durable medical equipment is medically necessary. Sometimes called prior authorization, prior approval or precertification.

**Glossary of health coverage and medical terms - Sharp**
The periodic payment to Medicare, an insurance company, or a health care plan for health or prescription drug coverage.

**Glossary | Medicare**
Services, supplies, or drugs that are needed for the prevention, diagnosis, or treatment of your medical condition and meet accepted standards of medical practice. Minimum essential coverage. Health coverage that will meet the individual responsibility requirement.

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