

# Personal Health Portfolio



## Chapter 17 Understanding Your Insurance Coverage

Having health insurance means that you are more likely to seek preventive care, get prompt treatment for an injury or acute illness, and successfully manage chronic conditions like diabetes. Knowing what your coverage does and doesn't include will help you to understand your health care options. This activity is designed to help you explore how your insurance plan works. You may need to talk to your parents, look online at your plan information, or even call your insurance company to answer the questions. This is critical knowledge for you to have at all times!

Hopefully, you have health insurance—if not, identify an insurance plan available on a health exchange (visit [www.healthcare.gov](http://www.healthcare.gov)) and complete the activity using that information.

### INSURANCE BASICS

1. What is your insurance coverage (name of company and plan)? Are you covered individually, through school, through an employer, or on your parent's plan? What are the criteria for your coverage—that is, does your coverage end when you are no longer a student, when you reach a certain age, or if your employment ends?
2. How much is the insurance premium (the amount you pay monthly or that your parents pay to have you on their plan)? Is there a deductible—an amount you must pay out of pocket before the insurance begins to pay any part of the costs? What is the annual out-of-pocket maximum (total amount you could be required to pay in a given year)?
3. What type of plan do you have? For example, is it a health maintenance organization, exclusive provider organization, preferred provider organization, or point-of-service plan?
4. Identify local providers that are covered by your plan: a physician or clinic, an emergency room, and a hospital. List the locations and phone numbers for each. If your plan differentiates between different tiers or classes of providers, indicate whether the providers you identify are “preferred” or “in-network” to your plan or would be considered a higher-cost tier. If your campus has a health clinic, does it take your insurance? If you have a student insurance plan, can you go to other providers?

### COST AND COVERAGE

Health insurance balances cost of a policy with the protection or services it offers. In addition to a premium (monthly payment), you will have to pay an additional charge for services you receive. The amount you pay may vary by location of service (clinic visit, ER visit, hospital stay) and type of service (preventive visit, emergency care, mental health, physical therapy). Determine what your cost would be under your current plan for the following types of services. Sometimes this is a set fee (such as \$20 copayment) or a percent of visit cost (such as 20 percent of visit charge).

1. You are feeling well and want to have a preventive care exam to see if there are things you should be doing differently. How much do you pay if you have a preventive exam (annual, well check-up)?
2. You have a sore throat and a fever. You want to go to the doctor to see if you have strep throat. How much will you pay for a clinic visit to diagnose your symptoms?
3. The doctor orders a strep test. What do you pay for diagnostic tests?

4. The strep test is positive and you need antibiotics. The doctor orders penicillin. How much do you pay for prescription medications?
5. On summer break, you sprain your ankle and go to the emergency room. How much do you pay for an ER visit?
6. You get a referral to physical therapy for your ankle sprain: Is it covered by your insurance, and again, what do you pay? Is there a limit on the number of visits?
7. You have been having back pain for a few months and are thinking of going to a chiropractor. Does your insurance cover health care from a chiropractor? If so, are there limits to the coverage—a limit on the number of visits or a requirement for a physician referral?
8. Your health provider thinks you have appendicitis and wants to send you to the hospital. Does your insurance cover hospital expenses? If so, at what cost? Do you need to go to a certain hospital, and does the stay require pre-authorization?
9. You have a fabulous summer break and when you return in the fall, you start to feel depressed. You want to see a counselor. How much do you pay for mental health counseling? Compare the plan's policy for mental health benefits and physical health benefits. Do you notice any differences? If so, list two counselors (or clinics) in your area who would be covered by your plan.

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## CRITICAL THINKING QUESTIONS

1. How would you rate your insurance—is it good, bad, so-so? Consider its cost to you or your parents and the coverage it provides you for that cost.
2. What aspects of your insurance plan work well for you and your lifestyle and current health concerns? What aspects could limit your ability to get the care you need when you need it? What would you change about your plan if you could?
3. What did you learn from this activity? Were you surprised by any of the costs, limitations, or requirements of your insurance plan?