

CHAPTER 11

ACTIVITY

OBJECTIVE

The purpose of this activity is for students to analyze and compare different health insurance plans, and to calculate the amount of out-of-pocket expenses paid on insurance claims given different scenarios.

Health Plan Overview

Teacher Directions

Hand out the student activity sheet and health plan comparison.

Explain the difference between In Network and Out of Network coverage ("In-Network" doctors, hospitals, and medical providers have contracted with the insurance company to provide medical services to members at a certain rate. Members still have coverage at "Out of Network" providers; however, the cost is greater.)

Students will compare the two plans and calculate the out-of-pocket expense (the portion of the medical bill that insurance doesn't cover) for each service.

Answers

Health Choice	Super Health
1. \$5 (doctor visit in network)	\$95 (hasn't met deductible yet)
2. \$25 (hospital was in network)	\$115 (after this meets deductible)
3. Prescriptions \$10 (hospital and surgery covered because in network)	Prescription \$5 (hospital and surgery covered)
4. \$10 (co-pay for in network)	You pay \$4.50, insurance pays 90% (deductible met)
5. You pay \$17, insurance pays 80% (out of network, deductible met)	You pay \$8.50, insurance pays 90% (deductible met)
6. \$5 (generic)	\$5 (generic)
7. You pay \$56.25, insurance pays 75% (out of network)	\$5 (brand)
8. Co-pay is \$5	\$9.50 (insurance pays 90%)
9. Co-pay is \$25	Covered
10. \$10 (in network)	You pay \$10.50 (insurance pays 90%)

Chapter 1health Plan Overview Answers

Michelle a Green,Rowell



Chapter 1health Plan Overview Answers:

Understanding Health Insurance Michelle a Green,Rowell,2003-07 *Understanding Health Insurance A Guide to Professional Billing* 7th edition utilizes a step by step approach to provide instruction about the completion of health insurance claims The objectives of this edition are to 1 introduce information about major third party payers 2 provide up to date information about federal health care regulations 3 clarify coding guidelines and provide application exercises for each coding system 4 introduce reimbursement issues 5 emphasize the importance of coding for medical necessity and 6 help users develop the skill to complete claims accurately Case studies and review exercises provide users with numerous opportunities to apply knowledge and develop skills in completing CMS 1500 claims accurately The textbook CD ROM and accompanying workbook provide additional exercises and practice in completing CMS 1500 claims electronically Current information is provided on CPT 5 and ICD 10 CM coding systems The appendices include information about processing the UB 92 CMS 1450 and dental claims

Introduction to Health Services Administration - E-Book Elsevier Inc,2017-10-23 Learn how to effectively manage both people and a practice as a health care administrator with Elsevier s *Introduction to Health Services Administration* This comprehensive and easy to understand text includes an overview of health care delivery in the United States along with an exploration of each role and function of a health services administrator in an ambulatory care facility From scheduling patients to managing the revenue cycle you will learn about every aspect of workflow in addition to relevant issues that heavily influence health care practices today like HIPPA regulatory compliance civil and criminal law and more This text also provides a wonderful overview of necessary skills such as how to use an electronic health record system and practice management software how to budget for staff and equipment how to manage inventory how to manage risk how to improve quality and performance in the practice and how to best market the practice If you re looking to become a successful health services administrator this text is the critical first step

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