# UNDERSTAND YOUR
# HEALTHCARE RESPONSIBILITY

Let's face it – healthcare can be confusing. There are many different terms that make it difficult to understand what is covered by your insurer and what you are responsible to pay. Check out these definitions of four commonly used healthcare insurance terms from Healthcare.gov to better understand your healthcare responsibility.

## DEDUCTIBLE

The amount you pay for covered healthcare services before your insurance plan starts to pay. With a $2,000 deductible, for example, you pay the first $2,000 of covered services yourself.

After you pay your deductible, you usually pay only a copayment or coinsurance for covered services. Your insurance company pays the rest.

## CO-PAYMENT

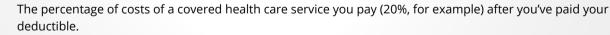A fixed amount ($20, for example) you pay for a covered healthcare service after you've paid your deductible.

Let's say your health insurance plan's allowable cost for a doctor's office visit is $100, and your copayment for a doctor visit is $20.

- If you've paid your deductible: You pay $20, usually at the time of the visit.
- If you haven't met your deductible: You pay $100, the full allowable amount for the visit.

Co-payments (sometimes called "co-pays") can vary for different services within the same plan, like drugs, lab tests, and visits to specialists.

## COINSURANCE

The percentage of costs of a covered health care service you pay (20%, for example) after you've paid your deductible.

Let's say your health insurance plan's allowed amount for an office visit is $100 and your coinsurance is 20%.

- If you've paid your deductible: You pay 20% of $100, or $20. The insurance company pays the rest.
- If you haven't met your deductible: You pay the full allowed amount, $100.

## OUT-OF-POCKET MAXIMUM/LIMIT

The most you have to pay for covered services in a plan year. After you spend this amount on deductibles, copayments, and coinsurance, your health plan pays 100% of the costs of covered benefits.

The out-of-pocket limit doesn't include your monthly premiums. It also doesn't include anything you spend for services your plan doesn't cover.