

HEALTH INSURANCE POLICY

PLAN TYPES:

- HMO (Health Maintenance Organization): Lower costs, limited network
- PPO (Preferred Provider Organization): More flexibility, higher premiums
- HDHP (High Deductible Health Plan): Lower premiums, higher out-of-pocket costs
- EPO (Exclusive Provider Organization): No out-of-network coverage except emergencies

COVERED SERVICES:

- Preventive care (annual check-ups, vaccinations)
- Emergency services
- Hospitalization
- Prescription drugs
- Mental health services
- Maternity and newborn care

COST SHARING:

- Premium: Monthly payment to maintain coverage
- Deductible: Amount paid before insurance begins coverage
- Copayment: Fixed amount paid for specific services
- Coinsurance: Percentage of costs paid after meeting deductible
- Out-of-pocket maximum: Limit on total annual expenses

ENROLLMENT PERIODS:

- Open Enrollment: Annual period to enroll or change plans
- Special Enrollment: Available after qualifying life events