

Point of Service (Flex Fit) Plan Glossary

Co-Payment: Co-payment is a predetermined (flat) fee that an individual pays for health care services, in addition to what the insurance covers. For example, some POS plans require a \$10 "co-payment" for each office visit, regardless of the type or level of services provided during the visit.

Emergency Condition: a medical condition, the onset of which is sudden, that manifests itself by symptoms of sufficient severity, including severe pain, that a prudent lay person, possessing an average knowledge of medicine and health, could reasonably expect the absence of immediate medical attention to result in placing the health of the person afflicted in serious jeopardy. Examples of a medical emergency include chest pain, broken bones, a cut requiring stitches, difficulty breathing and unconsciousness. Emergency care is covered world wide for Independent Health participants.

In-network: Providers or health care facilities which are part of a health plan's network of providers with which it has negotiated a discount. Insured individuals usually pay less when using an in-network provider, because those networks provide services at lower cost to the insurance companies with which they have contracts. Independent Health's POS network is comprised of participating providers in the 8 counties of Western New York.

Out-of-Network: This phrase usually refers to physicians, hospitals or other health care providers who do not participate with a particular insurance company. When you receive services from a non-participating provider, you are considered out-of-network.

Primary Care Physician: Participants in the Point of Service plan must select a primary care physician. Treating physicians are responsible for obtaining any required pre-authorization for services.

Urgent Condition: the sudden onset of an illness, injury or condition that is not a medical emergency, but requires immediate outpatient, medically necessary services at a physician's office. Examples of an urgent condition include a suspected sprained ankle, skin rash, ear infection or fever. Urgent care is covered world wide for Independent Health POS participants.

Out-of-Area Options for Point of Service Plan

Center of Excellence: a hospital or facility that provides the best possible medical outcome for a unique medical condition.

Co-Insurance: Co-insurance refers to money that an individual is required to pay for services after a deductible has been paid. Co-insurance is often specified by a percentage. The most common coinsurance level is one in which the employee pays 20 percent of the expenses and the insurer pays 80 percent. This is called 80 percent coinsurance.

Deductible: The amount an individual must pay for health care expenses before insurance begins to cover costs.

Out-of-Area: for Point of Service plans, you are considered out-of-area when you are outside the service area of Independent Health. The 8 counties of WNY are considered the service area.

Usual, Reasonable and Customary (UCR): Usual rate means the fee regularly charged and received for a given service by a provider. Customary and Reasonable means the fee for a service that is the most reasonable and standard amount charged by providers in the locality where the charge for services is supplied. IHA reimburses at the 90th percentile of the UCR.