ACROSS
3. _____ care consists of measures, such as routine annual physicals, taken for disease prevention.
6. The Total Network Out-of-Pocket _____ is the most you’ll pay for any in-network covered health care costs in a calendar year.
7. The fixed dollar amount you’re responsible for paying each time you get care.
8. Providers HealthSelect of Texas® has contracted with to provide health care services. You can usually save money when you get care from in-_____ providers.
9. The percentage of the bill you must pay after you make your copay or if you must pay a deductible (see 2 DOWN).
11. An Explanation of _____ shows how your claim was processed and how much you may owe your provider. It is not a bill.
12. A _____ visit is a video conference or phone appointment with a health care provider for treatment of a non-emergency condition.

DOWN
1. Care from providers who are not in-network and will likely cost you more is _____-of-Network care.
2. How much you have to pay toward your health care costs before HealthSelect of Texas will start to pay for covered services in a given year (this applies to those enrolled in Consumer Directed HealthSelect℠ or if you get out-of-network care).
3. _____ Care Provider. Your first stop for medical services unless it is an emergency.
4. What you may need to obtain before you receive certain services that require approval from HealthSelect of Texas. _____-Authorization.
5. A provider focusing on a concentrated area of expertise. You may need a referral from your primary care provider (PCP) to see this provider.
10. A written order from your PCP for you to see a specialist.

Make sure to read the Insurance 101: Understanding Your Medical Plan article to learn more. Click here to find the solution.