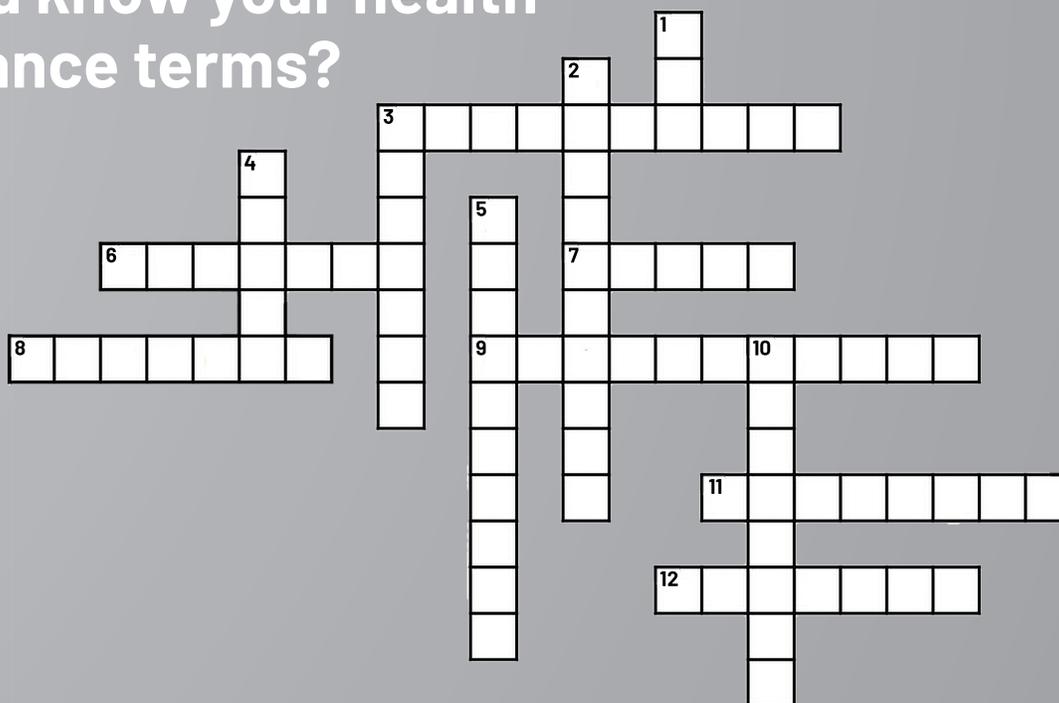


Do you know your health insurance terms?



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.

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 HealthSelectSM 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.

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.

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.

Blue Cross and Blue Shield of Texas is the third-party administrator for HealthSelect of Texas® and Consumer Directed HealthSelectSM.

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