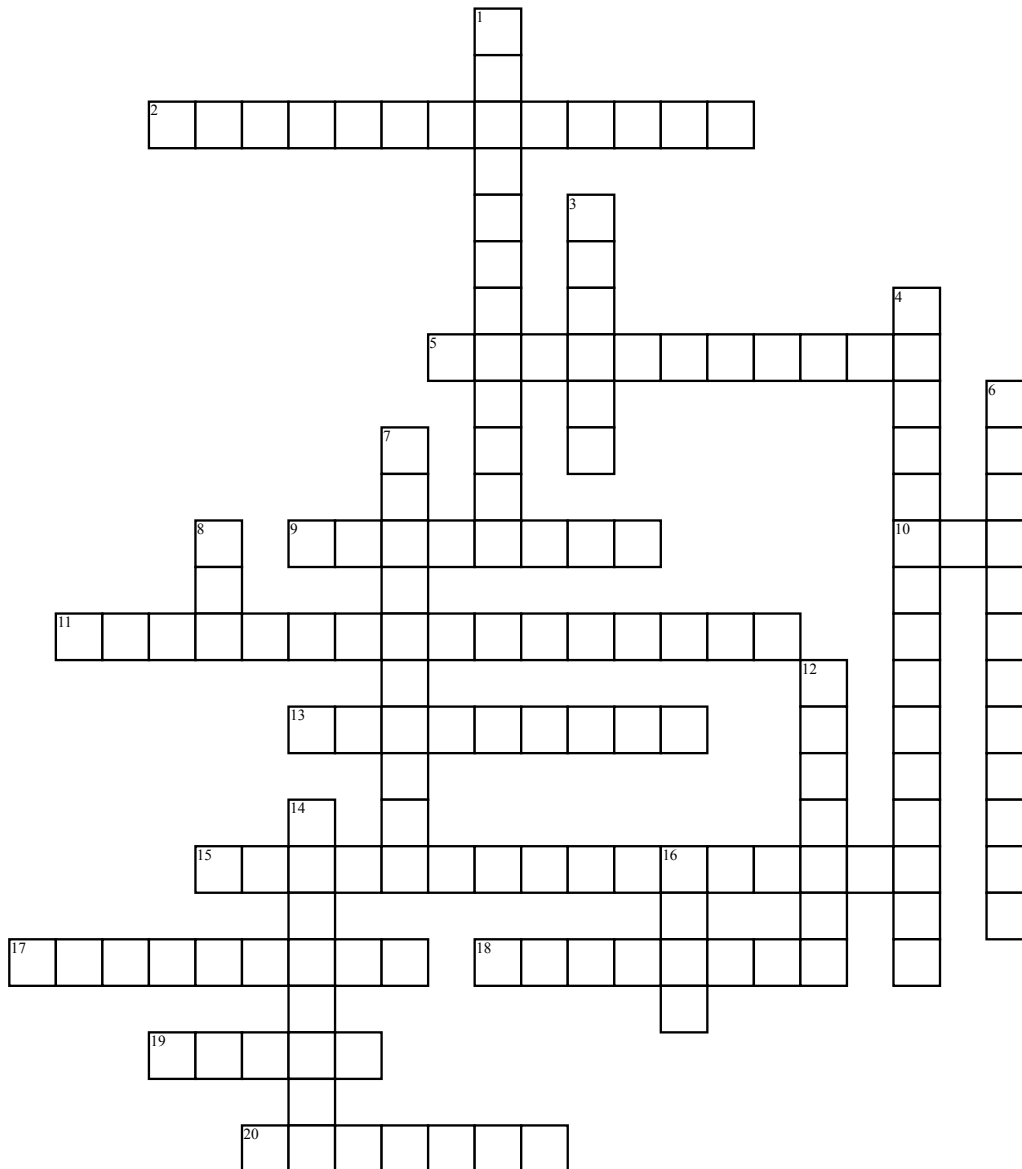


# Hospitals and Health Insurance



## Across

2. Officially recognized and authorized
5. This is the percentage of money that you are expected to pay after the deductible is reached.
9. Health insurance for very low-income people, funded by federal and state government
10. Health Maintenance Organization offer coverage similar to that of a major medical policy.
11. After you have paid this amount of money, your health insurance will cover 100% of your costs for medical services that are included in your plan.
13. If you think you have been treated unfairly or your claim was handled incorrectly you can file this form.
15. Some plans require that you precertify a healthcare service or procedure.

17. Offer a fixed amount of payment for the type of service or disease or injury.

18. These plans in the Marketplace have the highest premiums but the lowest deductible.

19. The flat fee that you are expected to pay for a medical service, such as a doctor's appointment

20. The groups of healthcare providers, laboratories, pharmacies, etc. that are connected to a specific health insurance company.

## Down

1. If you suffer a hardship, you can apply for this plan

3. Lowest premiums, high deductibles

4. A system that organizes people, institutions and resources to deliver health care services

6. This type of policy generally have a deductible and co-insurance with a lifetime maximum limit.

7. The amount of money that an individual pays before the benefits of health insurance kick in and co-insurance starts

8. Preferred Provider Organizations provide consumers with economic incentives if they contract to patronize a particular group of healthcare providers.

12. The amount of money that you and/or your employer pays the insurance company every month or year as part of the insurance plan

14. Federal health insurance program for people over 65

16. If you qualify, you can apply for it at any time during the year