

# Understanding your Health insurance benefits

- **Premium:** The amount you pay for your health insurance every month.
- **Deductible:** The amount you pay for covered health care services before your insurance plan starts to pay.
- **Benefits:** These are the types of services which the health insurance provider agrees to pay for.
- **Copayments:** A set amount you'll pay for covered health services once you've met your deductible. Copays can vary depending on whether it's for a medication, a visit to the doctor, or a lab test. If your insurance plan states that your copay for visits to the doctor is \$20, that's how much you'll pay for that care.
- **Co-insurance:** Your share of the costs of a covered health care service, calculated as a percentage of the allowed amount for the service.
- **Open enrollment:** The period of time each year when you can enroll in a new health insurance plan. You can typically sign up for health insurance through the Affordable Care Act marketplace from November 1 to January 15. But if you have a job-based plan, the dates might differ, so check with your employer.
- **Out of pocket expense:** How much you have to pay each year which can include deductibles, coinsurance, and copays that are not reimbursed by your health insurance plan.

## Health insurance options and information:

Most colleges have a student health plan for full and part time students who qualify.

Most insurances allow you to stay on your parents insurance until age 26.

Depending on a child's age of disability or injury they may be able to stay on their parents insurance indefinitely.

Every state has a Medicaid healthcare insurance plan for qualifying participants based on disability and income. They can be found by typing in the state and the word Medicaid then follow the prompts.

## Resources:

- [Healthcare.gov](https://www.healthcare.gov)
- [Medicare.gov](https://www.medicare.gov)