

# Insurance Review with Your Parents

a PickWell Resource

This checklist will help you review what you need to know to become more independent while still on your parent's plan. You may not need all the sections. There may be other topics that are not included. These are the basics and can help you get the conversation started.

There is a list of healthcare words and their meanings at the end. This glossary will help you understand key healthcare words that may be new to you.

If you need help comparing your parent's plan with your options from work, talk to your parents or contact us at [MsPickWell@pickwellhealth.com](mailto:MsPickWell@pickwellhealth.com)

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## Discussion Topics

### Review copays for different doctor's visit



- Primary Care Doctor
- Specialists
- Urgent Care
- Emergency Visits

What will you be responsible for?

Do you have a credit or debit card to pay the copays at the time of the visit?

### About Making Appointments



Ask for tips on how to make appointments with your doctors?

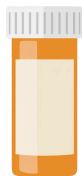
Are there different options for same day and future appointments?

Are there online tools or special phone numbers you should know about?

What hours do your doctors have?

How do you make appointments when you have work?

### Prescriptions



How do you (re)fill prescriptions?

Do you need to see a doctor to refill any?

When does this have to happen by?

What are the copays for your current prescriptions?

What pharmacies are in network?

## Additional Topics

Do you need a NEW Primary Care Provider? (for those aging out of pediatrics)



What urgent care locations are in network near you?

What other costs are you going to be responsible for?

What tips will help you navigate these appointments?

## What else do you need to do?

Make sure you have your own insurance card.

Ask when you are due for your next annual visits....

- Physical Exams
- Dentists Visits
- Eye Exams
- Other?

Know how to refill any prescriptions you have? Do you need a doctor's visit to refill them?

## KEY TERMS GLOSSARY (in alphabetical order)

Coinsurance	Your share of costs after meeting the deductible. Calculated as a percentage (e.g., 20%).
Copay	Fixed dollar amount you pay for a covered service (e.g., \$30 per doctor visit).
Deductible	Amount you pay out-of-pocket before insurance begins paying (except for preventive care).
Formulary	The list of prescription drugs covered by a plan, organized into cost tiers.
FSA	Flexible Spending Account – pre-tax account for medical expenses; use-it-or-lose-it rules apply.
HDHP	High-Deductible Health Plan – lower premiums, higher deductible; eligible for HSA contributions.
HMO	Health Maintenance Organization – requires a primary care doctor and referrals; lower cost but less flexibility.
HSA	Health Savings Account – tax-advantaged savings for medical costs; available with qualifying HDHPs.
Network	The group of doctors, hospitals, and providers contracted with your insurer at negotiated rates.
Out-of-Pocket Maximum	The most you'll pay in a plan year. After this, insurance covers 100% of covered services.

## KEY TERMS GLOSSARY (continued)

PCP	Primary Care Provider or Physician. They provide prevention and routine care, coordinate your care, and manage your referrals to specialists.
POS	A Point of Service (POS) health insurance plan is a mix between an HMO (Health Maintenance Organization) and PPO (Preferred Provider Organization) plan. It requires a primary care provider (PCP) for care coordination and referrals. It generally offers lower costs for in-network care, while providing coverage for out-of-network services at a higher cost to the user.
PPO	Preferred Provider Organization – more flexibility, no referrals needed; higher premiums. Out-of-network services are allowed.
Premium	Monthly amount you pay for health coverage, regardless of whether you use care.

