



CSU HEALTH NETWORK

COLORADO STATE UNIVERSITY

This glossary is to assist you in understanding the most used terms related to the insurance industry. It can also help in understanding the student insurance program; however, all of the terms are not specific to the program offered at Colorado State and therefore the glossary should only be used as an educational reference.

Accident

An event that is sudden, unexpected, and unintended, and over which the Covered Person has no control.

Assigned Benefits

A statement allowing your insurance company to make (assign) payments for your medical treatment directly to the hospital or physician. Otherwise, the money will be paid to the insured when bills and claim forms are returned to the insurance office.

Carrier, Underwriter, Insurer

The company that insures you.

Claim Form

A document that an insured person must complete as a part of the filing process. The form will usually ask specific questions relating to the medical treatment, previous history, etc.

Coinsurance

A provision of the insurance by which the covered person and the insurance carrier share in a specified ratio the eligible hospital or medical expenses resulting from a sickness or accident, (e.g. 80%:20% the carrier paying 80%, the insured person paying 20%).

Copayment

A specified dollar amount a Covered Person must pay for specified services.

Coordination of Benefits/Anti-Duplication Provision

Provision of the insurance designed to eliminate duplicate payments and provide the sequence in which coverage will apply when a person is insured under two or more health plans. This provision assures that no more than 100% of all incurred expenses will be paid by all insurance companies combined.

Deductible

The amount of out-of-pocket expenses that must be paid by the insured for health services before benefits become payable by the insurance carrier.

Doctor

A licensed practitioner of the healing arts acting within the scope of his or her license and practice.

Effective Date

Date the insurance coverage commences.

Elective Surgery and Elective Treatment

Surgery or medical treatment which is not necessitated by a pathological or traumatic change in the function or structure in any part of the body.

Eligible Expenses

Usual and customary expenses that may be used as the basis for a claim under the terms of the insurance.

Emergency Admission

A hospital admission for inpatient hospital confinement for a condition which, unless promptly treated on an inpatient basis, would (1) put the patient's life in danger; or (2) cause serious damage to a bodily function of the patient.

Exclusions

Specified conditions or circumstances for which a policy does not provide benefits.

Hospital

An institution operating under the supervision of a licensed physician primarily for the care and treatment of injured and sick persons confined as inpatients, having organized facilities on the premises for diagnosis, major surgery and 24 hour-a-day nursing services but not primarily a place for alcoholics or drug addicts, not a nursing, rest or convalescent home.

Hospital Confinement

A medically necessary overnight confinement in a hospital when room and board and general nursing care are provided and a per diem charge is made by the hospital.

Open Enrollment

Time period when students are eligible to enroll for coverage without having to prove insurability.

Out-of-Pocket

Includes the coinsurance payable by the claimant and any co-payments paid by the claimant. Out of Pocket does not include any excluded amounts (including but not limited to amounts over Reasonable and Customary or Usual and Customary and charges not covered by the policy) or amounts that exceed the maximum benefit allocation as listed in the Schedule of Benefits.

Pre-existing Condition

A pre-existing condition is a condition for which the person received medical treatment or advice, or which was diagnosed in the six months preceding the effective date of the person's coverage. An accidental injury sustained during the six months preceding the effective date of the persons coverage will also be considered a pre-existing condition.

Surgical Procedure

Cutting, suturing, treating burns, correcting fracture, reducing a dislocation, manipulating a joint under general anesthesia, electrocauterizing, tapping (paracentesis), applying plaster casts, administering pneumothorax, endoscopy or injecting, sclerosing solution.

Therapy Services (Medical)

Services used to treat or promote recovery from illness/injury.

A) radiation therapy is treatment using x-ray, radium, cobalt, or high energy particle sources. Radiation therapy includes rental or cost of radioactive materials. Diagnostic services requiring use of radioactive materials are not radiation therapy.

B) Chemotherapy is treatment of malignant disease by using chemical or biological antineoplastic agents.

Treatment

Medical care provided by means of consulting any medical provider about symptoms resulting from injury or sickness. Also includes, (but is not limited to) care by means of

diagnostic procedures (i.e., x-rays, lab, surgery); the taking of medications; therapy (physical, mental health, etc.); or the use of any appliance (medical or dental).

Usual and Customary Charge/Reasonable and Customary

The charge for the offered service or supply usually made by the provider when there is no insurance, not to exceed the prevailing charge in the area for a service of the same nature and duration and performed by a person of similar training and experience, or for a substantially equivalent supply.