

Terms and Acronyms

Acronym or Term	Definition
ACA MOOP	Maximum Out of Pocket-The most an insured will have to pay during a policy period for essential health benefits (as defined by the Affordable Care Act).
Co-Insurance/Coins	Coinsurance is a percentage of the cost of a covered service that you pay to your doctor. For example, if your coinsurance is 20% and your bill is \$100, you pay \$20, and Health Tradition pays \$80 (the remaining share). You do not start to pay coinsurance until after you have finished paying your deductible.
Copay	A copay is a fixed amount that must be paid by the patient to the doctor, usually before the service is completed. A copay is not a variable amount based on the total cost of the service.
Ded	Deductible-A deductible is the amount you pay to your doctor or pharmacy for covered services each benefit year before your insurance provider begins to pay.
DME	Durable Medical Equipment-Equipment and supplies ordered by a healthcare provider for everyday or extended use. Coverage for DME may include oxygen equipment, wheelchairs, crutches, or a CPAP machine.
Effective Date	The date on which insurance coverage begins.
ER	Emergency Room-The ER is the department of a hospital that delivers emergency care for acute illnesses or injury. This abbreviation usually indicates the copay for an ER visit.
Fam	Family-Often a plan will have a family deductible separate from the individual deductible. Each time an individual within the family pays toward his or her individual deductible, that amount is also credited toward the family deductible. Once the family deductible is met, after-deductible benefits kick-in for every member of the family whether or not they've met their own individual deductibles.
Group Name	The name of the group plan through which insurance is provided to the insured.
Group Number	The identification number, control number, or code assigned by the carrier or administrator to identify the group under which the individual is covered.
Ind	Individual-The individual deductible is the amount that an individual must pay before the insurance provider begins paying expenses.
INN	In Network-Doctors who are contracted with your plan are in network.
Max	Maximum-The maximum amount you can pay on your plan for this obligation.
MOOP	Maximum out of pocket-The maximum out of pocket is the most amount of money you will have to pay each benefit year for covered medical expenses as outlined in your plan document.
Network/Net	Contracted providers of healthcare (physicians, hospitals, testing centers, rehabilitation centers, etc.) that have negotiated discount fees for their services in return for steering patients to their practice.
OON/Non-Net	Out of Network-Providers of healthcare (physicians, hospitals, testing centers, rehabilitation centers, etc.) that are not contracted on your plan are out of network. It is more difficult to determine how your plan will reimburse for their services and, therefore, how much you will pay.
OOP	Out of Pocket-The amount that an insured is required to pay under a plan or insurance contract.

Acronym or Term	Definition
OV	Office Visit–An office visit is a meeting between a patient and a doctor to give and receive health information, treatment plans, or medical advice. It usually occurs at the doctor’s physical office.
PCP	PCP is an abbreviation used to refer to primary care physicians or primary care providers. A PCP is considered your main doctor. Your PCP is responsible for dealing with the majority of your healthcare issues.
RX	A medical prescription.
Spec	Specialist–Specialists are doctors who have advanced training and degrees in a branch of medicine and focus on one specific area of medicine.

Provider Tiers

Acronym or Term	Definition
Tier 1/T1	Tier 1 means you will pay a lower copayment or coinsurance. This tier includes lower cost, more efficient providers.
Tier 2/T2	Tier 2 means higher copayments or coinsurance. This tier includes more expensive, less efficient providers.
UC	Urgent Care–An urgent care center is a walk-in clinic that serves ambulatory urgent care outside of an emergency room at a hospital. This abbreviation usually indicates the copay for an UC visit.

Disclaimer: Each abbreviation may not be included on your ID card based on your type of health plan.