**Medical Insurance Definitions**

**Claim**- A written request by you for payment by the insurance company of medical expenses that are covered under the insurance policy.

**Co-payment**- Usually refers to the amount you pay each time you receive a particular service, usually doctor visits.

**Deductible**- The amount you must pay towards your healthcare before insurance will begin paying medical benefits.

**Emergency Care**- Emergency care is for life threatening conditions and is available at all hospitals. If you go to an emergency room for non-emergency care, you are likely to experience a very long wait, impersonal care, and receive a large bill.

**Exclusion**- Any condition or expense for which no coverage is provided and no payment will be made.

**Patient Responsibility**- Healthcare costs paid by you.

**Pre-existing Condition**- Any medical condition that has been diagnosed or treated before insurance coverage begins.

**Premium**- The cost to purchase an insurance policy.

**Referral**- The formal written authorization given by your primary care physician to the insurance company allowing you to receive healthcare from someone other than your primary care physician.

**Urgent Care**- Urgent care is for medical conditions that need immediate attention, but are not life threatening.