

Be familiar with the Health Care Insurance details

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The primary idea behind providing health care insurance is to make the medical services available to all the Americans at affordable prices. Health care insurance prices are determined by demand, cost of medical treatment and medical services, life style related changes like smoking, junk food consumption, intravenous drug abuse, excessive alcohol, etc. a typical medical underwriting is based on age, number of people, health history, occupation and lifestyle.

Most of the Americans, approximately 60%, and purchase health care insurance from the employer, around 9% directly and around 27% through various government agencies. On the whole around 84% of Americans have health insurance.

Government funded Medicare programs provide health insurance to senior citizens and end stage renal disease patients. In 2006, Medicare D provides insurance for the purchase of prescription drugs for the elderly. An expansion of the health care insurance options or Medicare is the Medicare Advantage.

Medicaid is the health care insurance for those who did not have any form of health insurance. But the number of physicians accepting Medicaid has decreased over the years due to low imbursements and high administrative costs.

Most of the private health care insurance providers are employer based. This can be either being traditional plans or managed care. Traditional indemnity or fee for service allows you to take medical services from a doctor of your choice and later on apply for the claims.

The managed care has grown to a majority in the US. The managed care can be HMOs or Health maintenance Organizations, PPOs or Preferred Provider Organization, and POS or Point of Service option.

The latest type of health care insurance which has grown in popularity in the US is the LTC or Long term care insurance. It is quite expensive and most of the people wait till retirement age to purchase it.

Health care insurance covers accident, illness, injury, and disease, doctor visits, surgeon and surgery expenses, costs of hospitalization and follow up therapy. There are also plans which extend cover to psychiatric care, drug and alcohol rehabilitation programs, and prescription medicines. Typical exclusions of health care insurance are pre existing conditions, substance abuse, attempted suicide, mental illness, cosmetic or elective surgery and procedures, optical and dental coverage, prescription medicine, and procedures determined to be preventive care.

You must be familiar with the federal laws that protect your rights and the procedure of making claims.