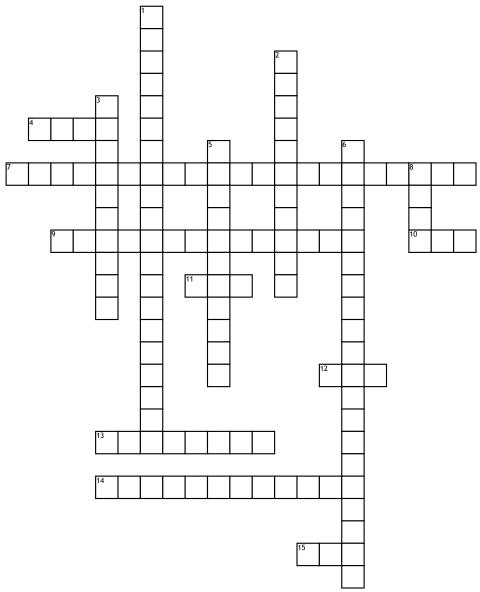
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Medicare Definitions



Across

- **4.** You can go to any doctor, hospital or healthcare provider as long as they accept the plan's payment terms
- **7.** For Medicare enrollment in a Part D plan
- 9. The highest amount of money that can be charged for a Medicare covered service by doctors & other healthcare providers who don't accept assignment 10. Medicare's Part D Prescription Drug

Plan which is voluntary

- 11. Insured has the choice to go in or out of the Provider Network of doctors and hospitals in plan, but agree to pay more if they do
- **12.** Part of the U.S. Dept. of Health & Human Services which governs the Medicare program

- **13.** A cooperative effort between Federal & State governments to give adequate medical care to eligible needy persons
- **14.** Medicare beneficiaries with low income & limited resources who are entitled to Medicare and some type of Medicaid benefit
- **15.** Managed Care structure where your primary care doctor must refer you to see other doctors, specialists, or to have tests except in an urgent or emergency situation

Down

- **1.** It occurs every year from October 15 December 7
- **2.** Another name for the Medicare member

- **3.** An agreement between individuals with Medicare & their doctors or suppliers & Medicare
- **5.** This is a Medicare supplement plan to cover the gaps Original Medicare does not
- **6.** A period of time in which Medicare-eligibles can enroll in or change their existing Medicare Advantage (Part C) plan
- **8.** For Medicare enrollment when a person would be eligible to enroll for the first time in Medicare Part A and Part B