

Name: _____

Date: _____

Patient Access

Across

3. Preferred Provider Organization

4. Health Maintenance Organization; A type of health insurance plan that usually limits coverage to care from doctors who work for or contract with the

9. Joint federal and state program to provide Medical insurance for the poor

10. Official count/list of patient population

12. Questionnaire to determine primary payor before Medicare

13. Person who is the holder of an insurance policy

14. A fixed payment for a covered service

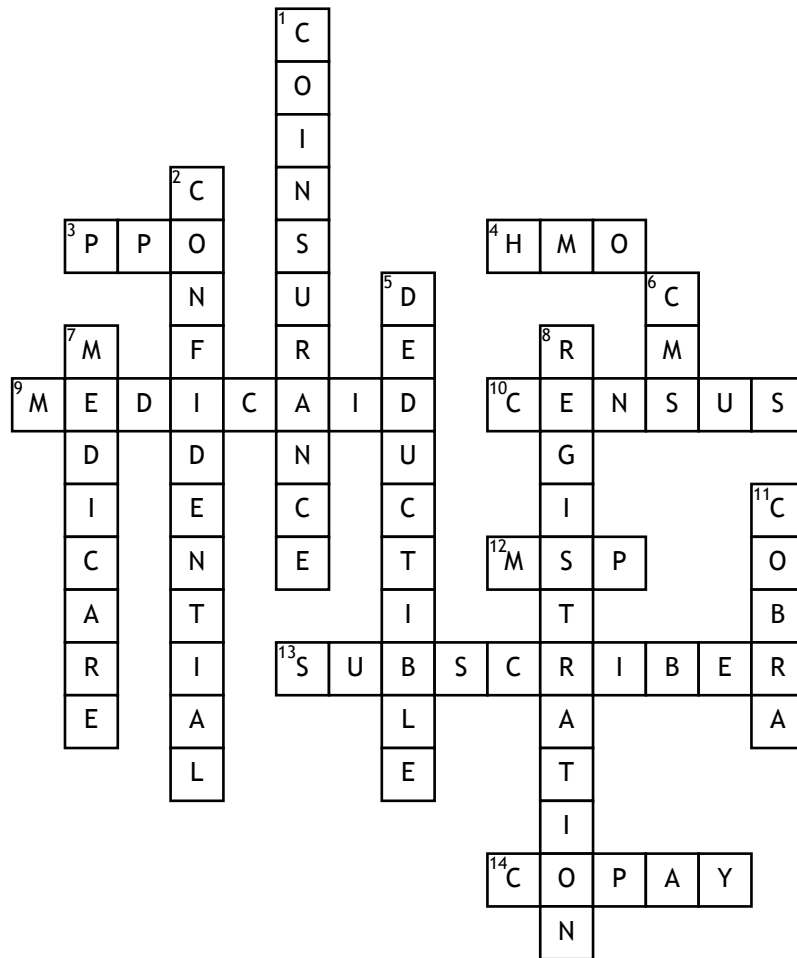
Down

1. Cost sharing in which the subscriber is responsible for a specific percentage of the cost of healthcare

2. Not to be disclosed

5. Fixed sum of money that beneficiary must contribute towards the cost of their healthcare before insurance benefits begin

6. The administrative branch within the Department of Health and Human Services that is responsible for Medicare and Medicaid Services



7. Federal health insurance plan primarily for seniors

8. Collection and storage on patient demographic, insurance, and clinical data

11. Federal law requiring employers to permit employees to continue their group health insurance coverage after termination

