

21st Century Employability Skills
Homework Packet
April 13th – 17th

Students, please complete this packet on day that we would normally have class (Monday and Thursday). Although school has been cancelled, I want to continue to ensure that you are still getting the necessary work to keep your minds fresh and in tuned with a normal-ish school setting. Be sure to follow our classroom Instagram @ms.talk.a for homework updates, share-outs, check-ins, and help. To turn in your work, either email a picture of the worksheet and email me a copy of your quick starts.

Day #1

Quick Start:

What is your passion? What can you do with that passion in the future?

Activity: “Health Insurance 101”

Day #2

Quick Start:

What goals have you set for yourself to be successful?

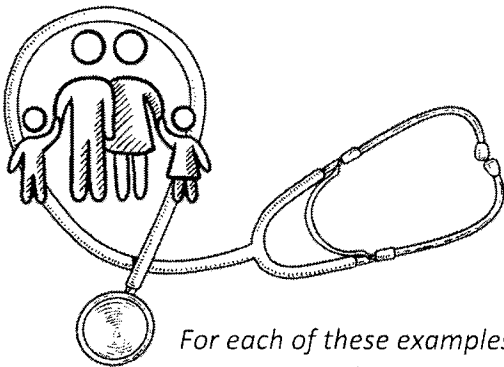
Activity: “Break a Leg”

HEALTH INSURANCE 101

Name: _____ Date: _____

Match the term with the definition.

- | | |
|---------------------------------------|--|
| 1) _____ deductible | a) The flat fee that an individual is expected to pay for a medical service, such as a doctor's appointment |
| 2) _____ out of pocket max (or limit) | b) The amount of money that you and/or your employer pays the insurance company every month or year as part of the insurance plan |
| 3) _____ co-pay | c) The amount of money that an individual pays before the benefits of health insurance kick in and coinsurance starts |
| 4) _____ co-insurance | d) After you have paid this amount of money, your health insurance will cover 100% of your costs for medical services that are included in your plan |
| 5) _____ premium | e) The percentage of money that you are expected to pay after the deductible is reached |



For each of these examples, fill in the correct term with the choices listed below:

deductible out of pocket max co-pay co-insurance premium


- 6) John had a lot of medical bills over the course of a year. His total bill was \$5,600. His insurance company would not pay any of his bill until he paid \$500. This is called a _____.
- 7) After John paid his \$500, the insurance company covered 80% of the remainder and John paid the remaining 20%. This is called _____.
- 8) Jane has to take her kids to the doctor for their check-ups twice a year. Each time she goes, she pays \$30 each visit. This is called a _____.
- 9) Bob has \$250 taken out of his paycheck each month to pay for his health insurance. This is called a _____.
- 10) Jane had several major medical procedures in one year. By August she had paid over \$10,000 and the insurance company will now pay 100% of the remainder of her medical bills for the year. This is called the _____.

Use the terms in the box below to match with the definitions listed:

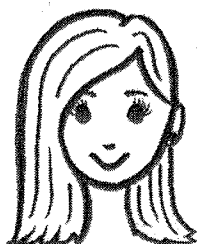
PPO	HMO	CMS	Medicare	Medicaid	Marketplace
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- 11) _____ The federal agency that runs the Medicare, Medicaid, and Children's Health Insurance Programs, and the federally facilitated Marketplace.
- 12) _____ A federal health insurance program for people 65 and older and certain younger people with disabilities.
- 13) _____ Insurance program that provides free or low-cost health coverage to some low-income people, families and children, pregnant women, the elderly and people with disabilities.
- 14) _____ A service that helps people shop for and enroll in affordable health insurance.
- 15) _____ A managed care plan where the patient must use physicians from a list of network providers in order to have the expenses paid by the insurance.
- 16) _____ A managed care plan where there is incentive to use physicians from a list of network providers. Typically, the incentive is a higher co-insurance percentage.

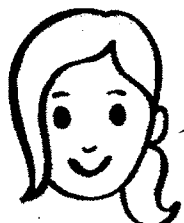
You have been asked to suggest a type of insurance to the following individuals. If you had to choose between PPO, HMO, Medicare and Medicaid, what health insurance would best match their needs? Fill in your choice in the box next to their name.



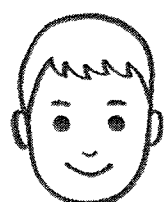
I am 63 years old and was recently diagnosed with end stage renal disease.



I am 29 and pregnant with my first child. I recently lost my job and struggle financially.



I am 39 years old and I like to have control over what doctors I see.



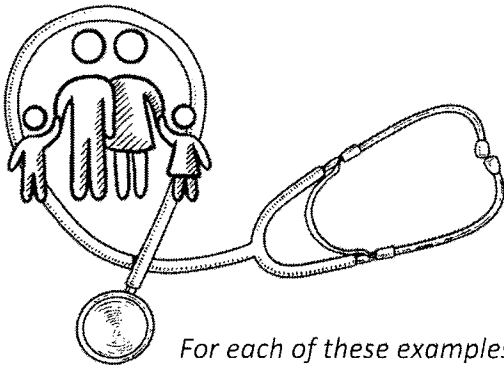
I am 28 years old and don't really care which physician I see. I just want the highest coverage possible.

HEALTH INSURANCE 101

Name: ANSWER KEY Date: _____

Match the term with the definition.

- | | |
|--|--|
| 1) <u>c</u> deductible | a) The flat fee that an individual is expected to pay for a medical service, such as a doctor's appointment |
| 2) <u>d</u> out of pocket max (or limit) | b) The amount of money that you and/or your employer pays the insurance company every month or year as part of the insurance plan |
| 3) <u>a</u> co-pay | c) The amount of money that an individual pays before the benefits of health insurance kick in and coinsurance starts |
| 4) <u>e</u> co-insurance | d) After you have paid this amount of money, your health insurance will cover 100% of your costs for medical services that are included in your plan |
| 5) <u>b</u> premium | e) The percentage of money that you are expected to pay after the deductible is reached |



For each of these examples, fill in the correct term with the choices listed below:

deductible out of pocket max co-pay co-insurance premium


- 6) John had a lot of medical bills over the course of a year. His total bill was \$5,600. His insurance company would not pay any of his bill until he paid \$500. This is called a deductible.
- 7) After John paid his \$500, the insurance company covered 80% of the remainder and John paid the remaining 20%. This is called co-insurance.
- 8) Jane has to take her kids to the doctor for their check-ups twice a year. Each time she goes, she pays \$30 each visit. This is called a co-pay.
- 9) Bob has \$250 taken out of his paycheck each month to pay for his health insurance. This is called a premium.
- 10) Jane had several major medical procedures in one year. By August she had paid over \$10,000 and the insurance company will now pay 100% of the remainder of her medical bills for the year. This is called the out of pocket max.

Use the terms in the box below to match with the definitions listed:

PPO HMO CMS Medicare Medicaid Marketplace

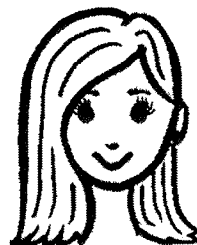
- 17) CMS The federal agency that runs the Medicare, Medicaid, and Children's Health Insurance Programs, and the federally facilitated Marketplace.
- 18) Medicare A federal health insurance program for people 65 and older and certain younger people with disabilities.
- 19) Medicaid Insurance program that provides free or low-cost health coverage to some low-income people, families and children, pregnant women, the elderly and people with disabilities.
- 20) Marketplace A service that helps people shop for and enroll in affordable health insurance.
- 21) HMO A managed care plan where the patient must use physicians from a list of network providers in order to have the expenses paid by the insurance.
- 22) PPO A managed care plan where there is incentive to use physicians from a list of network providers. Typically, the incentive is a higher co-insurance percentage.

You have been asked to suggest a type of insurance to the following individuals. If you had to choose between PPO, HMO, Medicare and Medicaid, what health insurance would best match their needs? Fill in your choice in the box next to their name.



I am 63 years old and was recently diagnosed with end stage renal disease.

Medicare



I am 29 and pregnant with my first child. I recently lost my job and struggle financially.

Medicaid



I am 39 years old and I like to have control over what doctors I see.

PPO



I am 28 years old and don't really care which physician I see. I just want the highest coverage possible.

HMO

CATCHING A BREAK

Name: _____ Date: _____

Barnaby Wild was riding his bike while next-door neighbor Mr. Eman was walking his dog. Sadly, he didn't hear or see Barnaby in time to avoid the crash.

Barnaby was taken to the ER at the local hospital. It was determined that he had broken his leg. Five days later in a cast and on crutches, he was released to return home.

Several weeks later, Barnaby's mom and dad received an invoice in the mail from the hospital. They were shocked to see a bill for \$25,000.

If Barnaby had no health insurance, they would be liable for the whole amount. However, they do carry insurance and will only pay a portion of that amount.

Instructions:

Look at each of the insurance cards and then calculate what Barnaby's family would need to pay over the entire year if this was their only medical expenses.

First, add up what they would be paying in premiums for the entire year.

$$\$400/\text{month} \times 12 \text{ months} = \$4,800$$

Next, subtract out the deductible from the \$25,000 bill since this amount has to be paid before insurance will start paying.

$$\$25,000 - \$1000 = \$24,000$$

Now find 10% of this new total (the Wild's part of the co-insurance).

$$\$24,000 \times .10 = \$2,400$$

Don't forget to include the \$50 ER visit co-pay!

Now compare this total to the out of pocket max (the most the Wild family would have to pay in medical expenses that year). If the total is larger than the out of pocket max, the family will simply pay that amount. In this case, \$2,400 is less than \$3000, so the Wild family will pay the \$2400.

Finally, just add up the amounts that were paid:

$$\text{TOTAL AMOUNT PAID: } \$4,800 \text{ (premium)} + \$1000 \text{ (deductible)} + \$2400 \text{ (10\% coinsurance)} + \$50 \text{ (co-pay)} = \$8,700$$



GOLDEN EAGLE
INSURANCE

Co-pay: Doctor's visit: \$75 ER visit: \$100
\$500 deductible
80/20 coinsurance,
\$2000 out of pocket max

Premium: \$250/month
Prescriptions: \$5 generic, \$15 brand name



Co-pay: Doctor's visit: \$25 ER visit: \$50
\$1000 deductible
90/10 coinsurance
\$3000 out of pocket max
Premium: \$400/month
Prescriptions: \$15 generic, \$35 brand name

TOTAL AMOUNT PAID: \$

National General 
Insurance

Co-pay: Doctor's visit: \$25 ER visit: \$50
\$2000 deductible
70/30 coinsurance
\$10,000 out of pocket max
Premium: \$200/month
Prescriptions: \$15 generic, \$35 brand name

TOTAL AMOUNT PAID: \$

Brightway
INSURANCE

Co-pay: Doctor's visit: \$75 ER visit: \$100
\$100 deductible
80/20 coinsurance
\$1000 out of pocket max
Premium: \$325/month
Prescriptions: \$10 generic, \$30 brand name

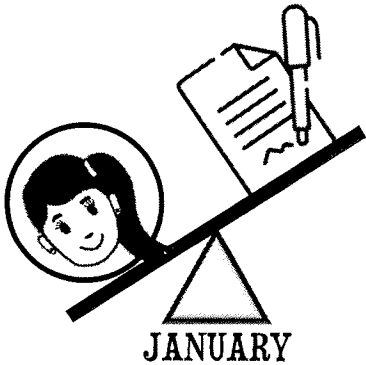
TOTAL AMOUNT PAID: \$

ALING AMY 

Amy has Allianz insurance. Read the following scenarios and determine what Amy must pay versus what her insurance plan will pay. Assume that it is the beginning of the year and the start of her coverage period.

Allianz 

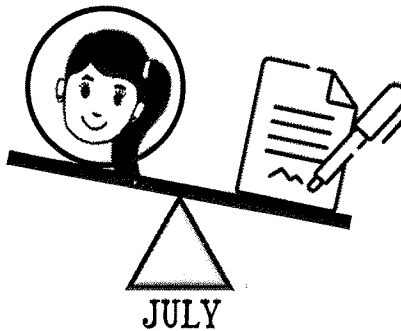
Co-pay: Doctor's visit: \$25 ER visit: \$50
\$1500 deductible
80/20 coinsurance
\$5000 out of pocket max
Premium: \$200/month
Prescriptions: \$15 generic, \$35 brand name



Amy hasn't reached her \$1,500 deductible. She went to the doctor and owed \$125.
 How much will:

Amy pays: \$ _____

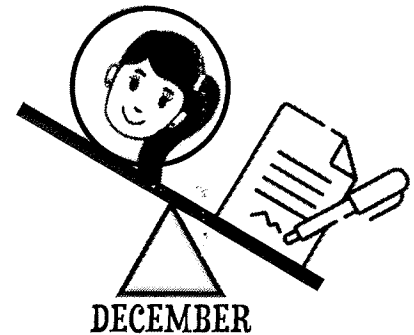
Her insurance pays: \$ _____



Amy has reached her \$1,500 deductible. Her co-insurance now begins. She had a medical procedure that cost \$2,000.
 How much will:

Amy pays: \$ _____

Her insurance pays: \$ _____



Amy has reached her \$5,000 out of pocket limit. She had minor surgery and owed \$5,000.
 How much will:

Amy pays: \$ _____

Her insurance pays: \$ _____

CATCHING A BREAK

Name: _____ Date: _____

Barnaby Wild was riding his bike while next-door neighbor Mr. Eman was walking his dog. Sadly, he didn't hear or see Barnaby in time to avoid the crash.

Barnaby was taken to the ER at the local hospital. It was determined that he had broken his leg. Five days later in a cast and on crutches, he was released to return home.

Several weeks later, Barnaby's mom and dad received an invoice in the mail from the hospital. They were shocked to see a bill for \$25,000.

If Barnaby had no health insurance, they would be liable for the whole amount. However, they do carry insurance and will only pay a portion of that amount.

Instructions:

Look at each of the insurance cards and then calculate what Barnaby's family would need to pay over the entire year if this was their only medical expenses.

First, add up what they would be paying in premiums for the entire year.

$$\$400/\text{month} \times 12 \text{ months} = \$4,800$$

Next, subtract out the deductible from the \$25,000 bill since this amount has to be paid before insurance will start paying.

$$\$25,000 - \$1000 = \$24,000$$

Now find 10% of this new total (the Wild's part of the co-insurance).

$$\$24,000 \times .10 = \$2,400$$

Don't forget to include the \$50 ER visit co-pay!

Now compare this total to the out of pocket max (the most the Wild family would have to pay in medical expenses that year). If the total is larger than the out of pocket max, the family will simply pay that amount. In this case, \$2,400 is less than \$3000, so the Wild family will pay the \$2400.

Finally, just add up the amounts that were payed:

$$\text{TOTAL AMOUNT PAID: } \$4,800 \text{ (premium)} + \$1000 \text{ (deductible)} + \$2400 \text{ (10\% coinsurance)} + \$50 \text{ (co-pay)} = \$8,700$$



GOLDEN EAGLE
INSURANCE

Co-pay: Doctor's visit: \$75 ER visit: \$100
\$500 deductible
80/20 coinsurance,
\$2000 out of pocket max
Premium: \$250/month
Prescriptions: \$5 generic, \$15 brand name

$$\$250 \times 12 = \$3,000$$

$$\$25,000 - \$500 = \$24,500$$

$$\$24,500 \times .20 = \$4,900 > \$2,000$$

$$\$3,000 + \$500 + \$2,000 + \$100 = \$5,600$$

TOTAL AMOUNT PAID: \$ 5,600



Co-pay: Doctor's visit: \$25 ER visit: \$50
\$1000 deductible
90/10 coinsurance
\$3000 out of pocket max
Premium: \$400/month
Prescriptions: \$15 generic, \$35 brand name

National General

Insurance

Co-pay: Doctor's visit: \$25 ER visit: \$50
\$2000 deductible
70/30 coinsurance
\$10,000 out of pocket max
Premium: \$200/month
Prescriptions: \$15 generic, \$35 brand name

$$\$200 \times 12 = \$2,400$$

$$\$25,000 - \$2,000 = \$23,000$$

$$\$23,000 \times .30 = \$6,900 < \$10,000$$

$$\$2,400 + \$2,000 + \$6,900 + \$50 = \$11,350$$

TOTAL AMOUNT PAID: \$ 11,350

Brightway

INSURANCE

Co-pay: Doctor's visit: \$75 ER visit: \$100
\$100 deductible
80/20 coinsurance
\$1000 out of pocket max
Premium: \$325/month
Prescriptions: \$10 generic, \$30 brand name

$$\$325 \times 12 = \$3,900$$

$$\$25,000 - \$100 = \$24,900$$

$$\$24,900 \times .20 = \$4,980 > \$1,000$$

$$\$3,900 + \$100 + \$1,000 + \$100 = \$5,075$$

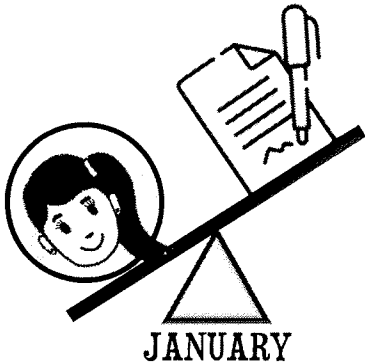
TOTAL AMOUNT PAID: \$ 5,100

ALING AMY

Amy has Allianz insurance. Read the following scenarios and determine what Amy must pay versus what her insurance plan will pay. Assume that it is the beginning of the year and the start of her coverage period.

Allianz

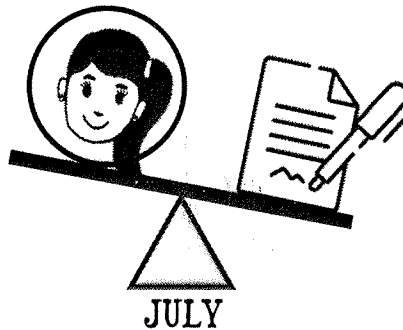
Co-pay: Doctor's visit: \$25 ER visit: \$50
\$1500 deductible
80/20 coinsurance
\$5000 out of pocket max
Premium: \$200/month
Prescriptions: \$15 generic, \$35 brand name



Amy hasn't reached her \$1,500 deductible. She went to the doctor and owed \$125.
 How much will she pay:

Jane pay: \$ \$125

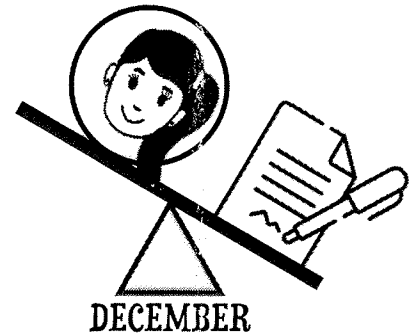
Her insurance pay: \$ 0



Amy has reached her \$1,500 deductible. Her co-insurance now begins. She had a medical procedure that cost \$2,000.
 How much will she pay:

Jane pay: \$ \$400

Her insurance pay: \$ \$1,600



Amy has reached her \$5,000 out of pocket limit. She had minor surgery and owed \$5,000.
 How much will she pay:

Jane pay: \$ \$0

Her insurance pay: \$ \$5,000