

Glossary of Terms

Beneficiary – A person or entity named on a life insurance policy to receive death benefits.

Carrier – A company that offers health benefit plans.

Co-insurance - A percentage of a health care cost that the covered employee pays after meeting the deductible.

Co-payment - A fixed dollar amount that the covered employee pays for medical services.

Deductible - A fixed dollar amount that the covered employee must pay out of pocket each calendar year before the plan will begin reimbursing for non-preventative health expenses.

Health savings account (HSA) - HSAs may be opened by employees who enroll in a high-deductible health plan. Employees can contribute pre-tax dollars through a payroll deduction in an HSA up to an annual limit set by the IRS (for 2019 the limit is \$3,500 for employee-only and \$7,000 for family coverage). HSAs may be used to pay for medical expenses and are owned by the employee. The account remains with an employee after employment ends.

High-deductible health plan (HDHP) - A HDHP has higher annual deductibles than traditional preferred provider organization (PPO) or health maintenance organization (HMO) plans. With the exception of preventive care, covered employees must meet the annual deductible before the plan pays benefits. HDHPs can be used in conjunction with HSAs.

In-network - Doctors, clinics, hospitals and other providers with whom the health plan has an agreement to care for its members.

Open Enrollment - A period of time (usually once per year) when employees of companies may make changes to their elected insurance benefits.

Out-of-network - A health plan will cover treatment for doctors, clinics, hospitals and other providers who are out-of-network, but covered employees will pay more out-of-pocket to use out-of-network providers than for in-network providers.

Out-of-pocket maximum - The most an employee will have to pay for covered services in a plan year. After you spend this amount on deductibles, co-payments, and co-insurance, your health plan pays 100% of the costs of covered benefits.

Premium - The amount that must be paid for a health insurance plan by covered employees, by their employer, or shared by both. A covered employee's share of the annual premium is generally paid periodically, such as monthly, and deducted from his or her paycheck.

HUMAN CAPITAL

MANAGEMENT SOFTWARE

Kronos Workforce Ready® suite combines the power of workforce management and human capital management in one unified platform to manage your workforce from pre-hire to retire.

PAYROLL SOLUTIONS

Take the pain out of payroll and get back your business by utilizing Axiom's customized payroll services.

HUMAN RESOURCE SOLUTIONS

Focus on your business growth and opportunity while reducing your risk. Our dedicated HR team provides top-notch advice in all areas related to your employees.

9810 Westpoint Drive
Suite 150
Indianapolis, IN 46256
877-587-1019
axiomhrs.com