

## **A Patient's Guide to Understanding Insurance Coverage and Payment Practices**

**Thank you for choosing Capitol Rehab for your therapy needs. As a patient you should be involved in your medical treatment and in understanding your health care. This document will help you understand your health insurance policy and payment process.**

### **FAQ:**

#### **What is a health insurance policy?**

Your health insurance policy is a contract between you and your health insurance company. It is an agreement that your health insurance company will pay for covered medical care as long as your premium is paid. Our office deals with hundreds of plans and does not know the details of your particular plan. We call and verify each person's insurance, but the answers are only as accurate as the customer service representative giving them to us. We often find the information given is inconsistent, that is why it is important for you to learn your particular plan's coverage.

#### **What are some common insurance terms I should know?**

- Co-Payment - The portion of your medical bill which you must pay each time you visit the doctor. This fee is pre-set by your health plan. Some plans have a co-pay for the doctor's evaluation plus a co-pay for procedures performed.
- Co-Insurance - The portion of your medical bill which must pay, which is a percentage of your total medical bill. This should be paid each visit or a credit card needs to be kept on file and will be billed monthly when patient statements are generated.
- Deductible - The cost you must pay for medical treatment before your health insurance company starts to pay. A new deductible must be satisfied each calendar/ policy year.

#### **How is the doctor's office paid?**

The patient pays the co-pay, if applicable, at the time of service. The office submits a claim to the insurance company seeking payment for services rendered, and the insurance company pays the office, minus any applicable co-pay, co-insurance, or deductible, at a contracted fee scheduled. The office then charges the patient for any approved co-insurance or deductible if different from the amount collected at time of service. The process by which the office seeks payment is very complicated, which is why we need correct information from each patient.

#### **What information should I bring to the office?**

- Photo ID, such as driver's license or passport
- Your current health insurance card
- Any change of personal information, such as name, address, employer or phone number
- Payment for co-pay, co-insurance, or deductible
- If patient is a minor, the parent/ guardian must accompany.

#### **Why does the doctor's office need my personal and health insurance information to get paid?**

We are required to collect the information in order to confirm your health insurance coverage and to send your health insurance company a claim for payment on your medical bill. The health insurance company requires your personal information, before it will pay your bill. Be sure that our staff has all your correct information so that your health company can pay your bill. If your health insurance company notifies our office that it cannot determine your coverage because of missing or incomplete information, you will be responsible for payment of your entire bill.

#### **What if my health insurance company does not pay, or only pays a portion of my bill?**

Please contact our office and as a courtesy to you, our staff will contact your health insurance company and ask why the bill was not paid completely. The health insurance company may ask our office to appeal or re-send the bill with more information. You may receive a copy of our appeal letter, or duplicate correspondence from your health insurance company. We may require your help to get a bill paid when your health insurance company does not pay. You may be asked to contact your insurer or employer to find out why the bill is unpaid. There are a number of reasons why a health insurance company does not pay a bill or a portion of a bill.

#### **What are some common reasons a health insurance company may not pay for treatment?**

- You did not provide the health insurance company with the information or form required
- The health insurance premiums are unpaid, either by you or your employer
- The doctor is "out of network", which means we do not have a participation contract with your health insurance company
- A health insurance policy protocol was not followed, such as the responsibility to obtain a referral or prior authorization.