

Managing Your Insurance Prior to Surgery



It's a familiar story. Nearly everyone knows someone who has had surgery believing that his or her insurance policy would cover the expenses, only to discover later that not only was the surgery not fully covered, but also that there were other, unexpected expenses. Now the patient is left with a pile of bills that need to be paid. How can you protect yourself from this scenario?

Questions to Ask Your Doctor Prior to Contacting Your Insurance Company

- What is the specific name of the surgery I will be undergoing?
- If possible, can you provide me the code that will be used when the insurance company processes the claim?
- Will my surgery be done as an inpatient or outpatient procedure?
- May I have a list of all the providers involved in my surgery?

Once you have the answers to these questions, you are ready to contact your insurance company. Be sure to have all the necessary information readily available for a successful conversation.

Checklist for a Conversation with Your Insurance Company

- ✓ Ensure your insurance card is easily accessible.
- ✓ Know the name of your surgery, the accompanying code (if available), and the proposed date of surgery.
- ✓ Know the name and contact information of your doctor.
- ✓ Have a notepad and pen to write down key information learned.
- ✓ Note the name of the person with whom you are speaking, as well as the date and time.

You may be on the phone for some time. Be patient. The information you are gathering is crucial for a smooth experience with your insurance company. Once you are speaking to a live agent, kindly explain that you have some specific questions about your upcoming surgery. The agent should be happy to assist you with your questions, but if not, feel free to ask to speak with a manager.

Questions to Ask Your Insurance Company Prior to Surgery

The following questions will help you to sort through your coverage:

- Approximately how long will it take to get all of the approvals (pre-certification) I need prior to scheduling my surgery? (If your surgeon or hospital is out of network, you will likely have a longer approval process.)
- If I use an out-of-network provider, do I need a referral from my primary care clinic?
- How much will this procedure cost me after my insurance pays its portion?
- What is the maximum coverage on my policy, and will this procedure meet or surpass that amount?
- What type of coverage do I have if I need rehabilitation or home healthcare after surgery?
- Will any special equipment I need after surgery, such as a hospital bed or assistive devices, be covered?
- Do I have disability insurance?
- How much is my weekly/monthly disability benefit?
- If my recovery takes longer than expected, then when will my disability coverage start?
- How much of my prescription costs after surgery will I be expected to pay each month?
- Am I at or near my coverage limit (out-of-pocket maximum)?

You + Your Insurance Company = A Perfect Match

Understanding the relationship between you and your insurance company is important. The general flow of this relationship looks like this:

- You receive a recommendation from your doctor for surgery
- The paperwork required by your insurance company to acquire precertification is completed (either by you or your doctor)
- You receive notification from your insurance company regarding coverage
- The surgery is completed and your insurance company pays the bill, less any co-pay or deductible (which is your out-of-pocket expense)

But what if your coverage is denied? This can occur for a variety of reasons including:

- Your surgery is specifically not covered by your policy (benefit plan)
- You have exceeded your benefit level
- The surgery is considered to be experimental or unproven and is therefore not acceptable to your insurance
- Your insurance company feels the surgery isn't necessary

If you feel that you have been unfairly denied coverage, you may choose to appeal the decision. As of July 1, 2011 insurance companies are required to provide in writing information on how to appeal a decision.

Finally, remember that your insurance company should work with and for you. With a little preparation, you can ensure that you receive the best coverage possible.

Why Asking Questions Prior to Surgery Is Important *It can be tempting to believe that your insurance will cover your claim with no questions asked. Unfortunately, this is sometimes not the case. By contacting your insurance provider prior to a scheduled procedure or surgery, you can proactively manage your care and coverage.*

Terms You Should Know

CO-PAYMENT: A flat dollar amount which a patient must pay when visiting a healthcare provider.

DEDUCTIBLE: A dollar amount that a patient must pay for healthcare services each year before the insurer will begin paying claims under a policy.

DISABILITY INSURANCE: A form of insurance that includes paid sick leave, short-term disability benefits, and long-term disability benefits in the event that you cannot work (and therefore cannot earn) your salary.

IN NETWORK: Healthcare providers explicitly covered by an insurance plan and included in all plan fees.

OUT OF NETWORK: Healthcare providers that are not included in the insurance plan will incur additional fees.

PRE-CERTIFICATION: Some health insurers require precertification (or approval) for certain types of healthcare services, such as surgery or hospital visits. This means that you or your doctor must contact your insurer to obtain their approval prior to receiving care, or else the insurer may not cover it.

Determining the Costs of the Procedure

Before you have surgery, discuss the costs with someone from the finance department at your doctor's office. These costs may include, but are not limited to, the following:

- The surgeon's fee for surgery
- Ambulatory Surgical Center fees for outpatient services.
- Separate billing for other services. You will also be billed separately for the professional services of others who might be involved in your care, such as the assisting surgeon, anesthesiologist, and other medical consultants.
- Check with your health plan prior to surgery to be certain of what portion of the costs you will be responsible for. If your anticipated costs present a problem, discuss other financial solutions with your doctor prior to the surgery.

Other Resources

To learn more about your insurance coverage prior to undergoing surgery, these online resources may provide more information and assistance:

NAIC CONSUMER INFORMATION SOURCE:

<https://eapps.naic.org/cis/>

MEDICARE:

www.medicare.gov

1-800-MEDICARE (1-800-633-4227)

www.healthcare.gov

<http://archive.ahrq.gov/news/columns/navigating-the-health-care-system/011608.html>