

KEEPING COSTS DOWN: CHOOSE AN IN-NETWORK PHYSICIAN OR HOSPITAL

WANT TO MAKE SURE YOU'RE GETTING THE MOST OUT OF YOUR HEALTH PLAN WHILE SAVING MONEY?

Choosing a physician or facility that is in your health plan network is the simplest way to do it.

THINGS TO CONSIDER BEFORE SCHEDULING YOUR NEXT DOCTOR VISIT:



- 1** Use the Find a Doctor or Hospital tool on Wellmark.com to make sure your provider is in your Wellmark health plan network.

IF YOU WOULD RATHER CALL US, use the Wellmark Customer Service number on your ID card.



- 2** Check to see if the hospital, surgery center or medical facility where you're planning a procedure is in-network or out-of-network.

IF THE FACILITY IS OUT-OF-NETWORK, consider asking your physician to refer you to one that's in-network to avoid extra costs.



- 3** If the doctor or facility is out-of-network, ask if you will be billed for the difference between what Wellmark allows and your full charge for the service.

IF THE PROVIDER SAYS NO, make sure to get it in writing. If yes, you may want to consider finding a provider that's in-network. Just visit Wellmark.com.

DID YOU KNOW? If you see an in-network provider, you won't ever have to pay the difference between what Wellmark allows for covered services and what the provider charges. Wellmark works with providers to get discounts on charges and makes sure our payment is accepted in full (except your deductible and coinsurance or copay) for services. Amounts you have to pay out-of-network providers above what Wellmark allows don't go toward your out-of-pocket maximum.

Understanding the out-of-network claim process

When you must see an out-of-network provider:

STEP 1

Ask your provider to submit the claim to Wellmark or a local Blue Cross and Blue Shield plan if you're outside Iowa and South Dakota.



IF YOU HAVE TO SUBMIT THE CLAIM YOURSELF, go to Wellmark.com and select "Forms."



You may have to pay the full charge up-front.

STEP 2

Once the claim is submitted and processed, you will get one or more of the following:



EXPLANATION OF BENEFITS (EOB) from Wellmark. An EOB is a recap of what your insurance has paid for.



CHECK(S) FROM WELLMARK for the services that may have been covered. You may get multiple checks for multiple services. Use these checks to pay for a portion of what you owe your provider.



BILL FROM YOUR PROVIDER. You must pay the full amount, unless you have negotiated other terms with the provider.

STEP 3



Review your **EOB(S)**, compare them with the **CHECK(S)** you may have received from Wellmark and **PAY THE PROVIDER** the negotiated amount.



Still have questions?

We want to help! Call Wellmark Customer Service at the phone number on your ID card. Or, log in to myWellmark — your source for in-network providers and tools to help you get the most from your benefits.



Find a Doctor or Hospital to find an in-network provider near you.



Health Care Cost Estimator to see how much it will cost you for a particular procedure or service.



My Benefits to understand which services are covered under your plan.



Check Drug Costs to get the most out of your prescription drug spending.

Negotiate with out-of-network providers

Wellmark can't negotiate with out-of-network providers on your behalf, but you may be able to negotiate directly before you see the doctor or get the service. Two helpful hints:

- **IF YOU GET A CHECK FROM WELLMARK FOR THE SERVICES THAT MAY HAVE BEEN COVERED,** offer to sign it over to the provider. Ask if the provider will accept the check as payment in full, or discount the amount that wasn't paid by Wellmark.
- **IF THE PROVIDER ACCEPTS THE CHECK AND DISCOUNTS THE AMOUNT YOU OWE,** don't sign over the check until the provider agrees to monthly payments for the amount that is left for you to pay, if needed.

Wellmark complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: Si habla español, los servicios de asistencia de idiomas se encuentran disponibles gratuitamente para usted. Comuníquese al 800-524-9242 o al (TTY: 888-781-4262).

注意：如果您说普通话，我们可免费为您提供语言协助服务。请拨打 800-524-9242 或（听障专线：888-781-4262）。

ACHTUNG: Wenn Sie deutsch sprechen, stehen Ihnen kostenlose sprachliche Assistenzdienste zur Verfügung. Rufnummer: 800-524-9242 oder (TTY: 888-781-4262).



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