



Out-of-Network (OON) Insurance Benefits Reference Sheet

Navigating insurance can be difficult but we hope this reference sheet can help. This guide and worksheet were created to better assist you in understanding your OON benefits and helping you to make an informed decision regarding out-of-pocket vs. reimbursable expenses. However, this is not a guarantee by Chevy Chase Pediatrics of reimbursement to you.

Deductible:

A deductible must be satisfied before the insurance company will pay for services. Please note that you may have separate In-Network and Out-of-Network deductibles and that they may be different amounts.

Coinsurance

Coinsurance is a cost-sharing arrangement in health insurance where you and your insurance company each pay a percentage of the covered expenses after you've met your **deductible**.

Reimbursement:

The reimbursement percentage provided by your insurance will be based on their established **UCR (Usual, Customary, and Reasonable)** rates for the specific services rendered. These UCR rates are determined by your insurance company and reflect what they consider to be a fair fee for medical services within a certain geographic area.

Please note that the **fees charged by Chevy Chase Pediatrics may differ from your insurance company's UCR rates**. As a result, you may be responsible for the difference between the amount reimbursed by your insurance provider and the actual charges incurred. We recommend contacting your insurance company in advance to understand their UCR rates and to determine the extent of coverage you may receive for services obtained out-of-network.

To support families in this process, Chevy Chase Pediatrics will provide all necessary documentation to assist with insurance reimbursement. This includes detailed receipts containing our practice's Tax ID, NPI number, procedure codes, diagnosis codes, and a record of payments received.

How to determine your OON benefits:

1. Call the toll-free number on your insurance card. Choose whichever option will allow you to speak with a live representative rather than using the automated system. You must let the representative know that you are seeing an OON provider.
2. Request a detailed quote outlining your out-of-network benefits specifically for both sick and well visits conducted in an office setting provided by a PCP.
3. Below are some of the questions you can ask to help obtain as much information as possible about your coverage and benefits. This is not a complete list and only designed as a tool to help navigate the conversation with your insurance company.

Questions to Ask Your Insurance Company

1. Do I have out-of-network benefits for preventative AND non-preventative health services? ☐ Yes ☐ No

2. Do I have a deductible? ☐ Yes ☐ No

a. If yes, how much is it? _____

b. How much has already been met? _____

3. Do I have a per calendar year plan or a per benefit year plan?

a. If per benefit year, what are my dates of coverage? _____

4. What percentage of coverage is my responsibility for seeing an OON provider? _____

5. What is the process for submitting a reimbursement claim for out-of-network expenses?

Be sure to get the name of the representative that you spoke to, the date and time you spoke to them and a reference number if they have one.

Name of Representative: _____ Date/Time: _____

Reference Number: _____