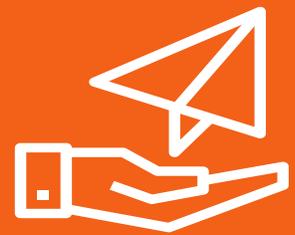


What Happens with My Health Insurance When I Visit the Doctor?

Navigating the complicated world of health insurance is a confusing process. It definitely doesn't help that you have to manage insurance claims while you are also dealing with health issues that are the reason you visited the doctor in the first place. Understanding how the insurance claims process works can make the situation easier to handle and help you avoid any surprises. Here are the basic steps involved in processing an insurance claim:

Claim is Submitted

You show your medical card to the doctor's office upon arrival and the billing department at your doctor's office will submit the insurance claim for you after your visit or medical procedure. If you visit a doctor outside of your health insurance network, you will have to do this step yourself.



Claim is Reviewed

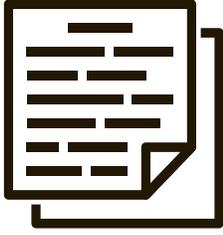


Your insurance company or medical plan claims administrator will review the claim and your benefits coverage based on the plan you elected. You may get a letter or call from your insurance company asking for more information about your illness, injury, or procedure, which is perfectly normal. Respond to any requests like these quickly so your claim is paid.

Claim is Paid

Your insurance company will pay all or some of the claim depending on the coverage your plan provides for that particular procedure. You will likely have some responsibility for payment, such as a co-pay, deductible, or co-insurance amount.





EOB is Sent

After your claim is processed, you will receive an EOB from the insurance company. The EOB includes information about your medical procedure and what is covered by your plan.

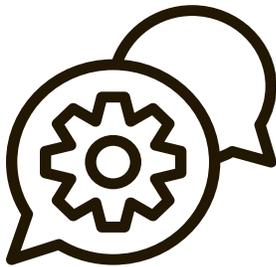
Final Bill is Received

Finally, you will receive a final bill from your doctor. Always review the amount on the EOB and the amount on your doctor's bill to make sure they match. If the amounts don't match or you haven't received an EOB from the insurance company, call the billing department at your doctor's office and the insurance company to discuss the difference.



How to Fix Mistakes

Some errors may occur while your insurance claim is being processed. Doctors may accidentally submit incorrect information on an insurance claim that can drastically change the outcome of the claim. When you receive your EOB, make sure to double check all the information listed. If something seems off, reach out to the billing department at your doctor's office and call your insurance company or medical claims administrator to get it straightened out.



Dealing with insurance claims is stressful. Participants on the Helpside Medical Plan have the added resource of our Client Success Team to help explain benefits and understand claims. If you have questions, reach out to us at service@helpside.com.