

Balance Billing

FOR OUT-OF-NETWORK SERVICES

It is important that you get health care services from doctors who are participating in your health plan's network. If you receive care from an out-of-network doctor, you may have to pay additional charges. These charges, known as Balance Billing, may be more than the amount you owe for your deductible and coinsurance.

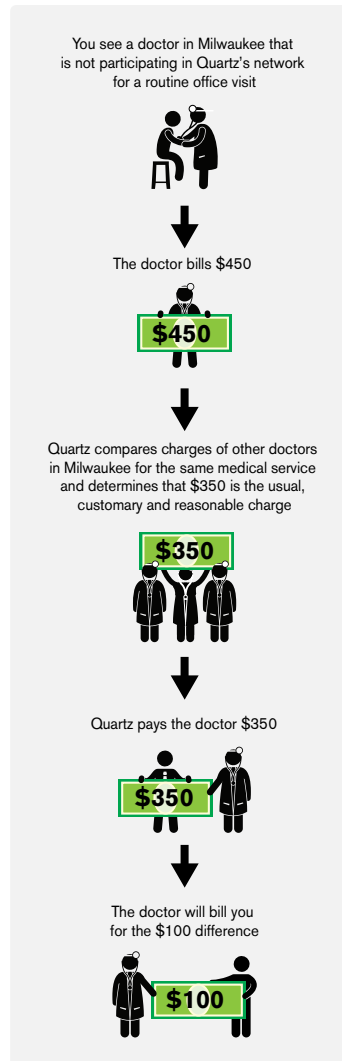
When a doctor participates in your health plan's network, he or she agrees to charge a specific rate for services. This rate is the amount that your health plan will pay them to care for you (known as the allowed amount).

Out-of-Network Services

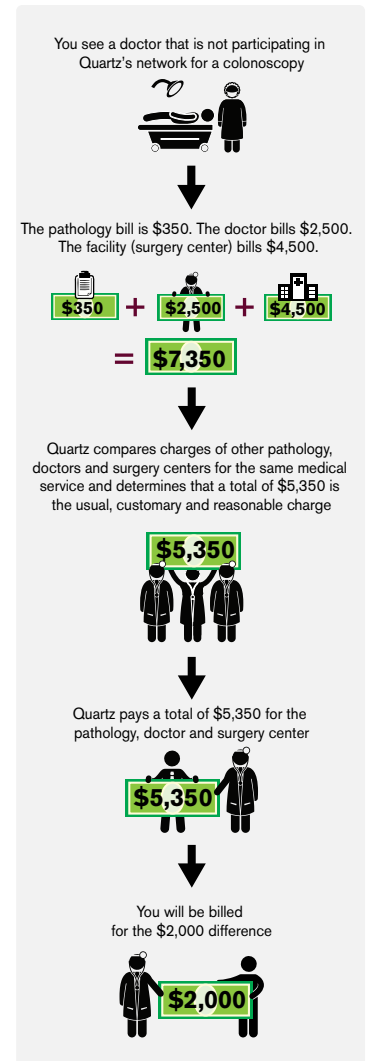
If you receive care from an out-of-network doctor, they may charge more than your health plan's allowed amount. Your health plan will compare charges from other doctors in the area for the same medical service. This comparison helps determine an amount that is usual, customary and reasonable (UCR) for that particular area. Your health plan will pay the amount that is identified as UCR. If there is a difference between what the doctor bills and what your health plan pays, your doctor may bill you for the difference. This is known as balance billing and these charges do not apply to your health plan's maximum out-of-pocket costs.

To avoid balance billing charges, you should see doctors participating in your health plan's network. Visit quartzaso.com/findadoctor to see which providers are included.

EXAMPLE 1



EXAMPLE 2



Usual, Customary and Reasonable (UCR) is determined by three components -

1. The service provided (the CPT code)
2. The date the service was provided
3. The zip code where the service was provided



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