

INSURANCE COVERAGE CHECKLIST

UNDERSTANDING YOUR PLAN

DO I HAVE AN HMO, PPO, EPO, OR POS PLAN?
WHAT IS MY ANNUAL DEDUCTIBLE?
WHAT IS MY OUT-OF-POCKET MAXIMUM?
WHAT ARE MY COPAYS AND COINSURANCE RATES?
ARE THERE ANY ANNUAL OR LIFETIME COVERAGE LIMITS?



DO I NEED REFERRALS TO SEE SPECIALISTS?

PROVIDERS & TREATMENT CENTERS

ARE MY DOCTORS AND SPECIALISTS IN-NETWORK?
ARE THE HOSPITAL AND TREATMENT FACILITIES IN-NETWORK?
WHAT HAPPENS IF I NEED OUT-OF-NETWORK CARE?
ARE SECOND OPINIONS COVERED?

MEDICATIONS & TREATMENTS

ARE MY PRESCRIBED MEDICATIONS COVERED?
WHAT FORMULARY TIER ARE MY MEDICATIONS ON?
ARE GENERIC OR LOWER-COST ALTERNATIVES AVAILABLE?
DOES MY TREATMENT REQUIRE PRIOR AUTHORIZATION?
ARE INFUSION THERAPIES, SCANS, AND RADIATION COVERED?

CLAIMS & BILLING

HOW DO I TRACK THE STATUS OF MY CLAIMS?
WHAT SHOULD I DO IF A CLAIM IS DENIED?
HOW LONG DO I HAVE TO FILE AN APPEAL?
WHO CAN HELP ME WITH BILLING OR CODING ERRORS?
DO I RECEIVE AN EXPLANATION OF BENEFITS (EOB) FOR EACH CLAIM?

FINANCIAL SUPPORT & PAYMENT OPTIONS

ARE THERE CASE MANAGERS OR PATIENT ADVOCATES AVAILABLE?
ARE PAYMENT PLANS OFFERED FOR HIGH MEDICAL BILLS?
ARE FINANCIAL ASSISTANCE PROGRAMS AVAILABLE THROUGH MY INSURER?
DO I QUALIFY FOR COPAY ASSISTANCE OR MEDICATION PROGRAMS?

EMPLOYMENT & LEAVE (IF EMPLOYER-SPONSORED)

VHAT	PROTEC	TIONS DO	I HAVE U	NDER FMI	A OR STA	TE LEAVE L	AWS?
/ILL N	MY JOB RI	EMAIN SE	CURE IF I	TAKE ME	DICAL LEA	VE?	
OW W	/ILL MY I	NSURAN	CE BE HAN	IDLED WH	ILE I'M ON	I LEAVE?	