

## INSURANCE AND BILLING: WHAT YOU NEED TO KNOW

This document will help to determine your insurance benefit coverage and can affect your personal out of pocket expenses. It is important that you educate yourself on your insurance policy coverage. Our practice has created this document to sort through some of the confusion and misinformation out there.

## **NMH** BILLING

It is important that Northwestern Medicine has your current, complete and accurate medical insurance information to reduce delays and potential out—of—pocket costs. Depending upon your insurance coverage, you may be asked for a portion of your copay or coinsurance amount for the services provided at the time of registration.

If you are uninsured or your insurance company does not pay for your treatment in full, you will receive a patient statement in the mail. Often, insurance plans do not cover the entire cost of your care, resulting in a "patient portion." You are responsible for the portion of the bill that your insurance company does not pay. We will send you a statement after your insurance has paid to notify you of any remaining balance.

You may also receive additional bills related to the services you received from our hospitals such as independent physician bills for services like pathology or anesthesiology services. If you have a **question about your bill, charges or codes used please visit NM MyChart or call (855) 694-2866**.

## HOW WILL I KNOW WHAT I WILL OWE?

To avoid any unforeseen charges, please verify your insurance benefits, coverage and preferred locations(s) / providers for this procedure. Obtain the preoperative CPT and Diagnosis codes from the information located on your procedure instructions and call your insurance company. Please note that procedures are subject to change based on findings from the procedure. It is important to understand your benefits prior to the procedure.

Diagnosis Code(s) (ICD-10):

	QUESTI	ONS FOR YOUR IN	SURANCE COMPA	ANY
1.	Are the CPT and diagnosis codes covered under my policy?  Is Northwestern Memorial Hospital and the Physician completing my procedure included within my Insurance Network:		YES YES	No No
2.				
3.	What are my benefits for that service? (Benefits vary based on how the insurance company recognizes the diagnosis).	Coinsurance:	Copay:	Deductible:



## **PRIOR AUTHORIZATION**

Our prior-authorization department will check with your insurance plan to inquire if a prior-authorization is needed and this will be completed if your plan requires.

- Please call your insurance company **3 business days prior** to your procedure to verify that authorization has been received.
- If your procedure has not been approved, please call our prior-authorization department at (312) 926-4645.

Call the **NMH Patient Financial Services department at (312) 926-6906** with any questions or concerns. They are available to help if you are struggling to understand your financial obligations for this procedure. However, it is still necessary for you to first call your insurance company and ask the above questions.

**Disclaimer**: This form does not guarantee coverage. It does not authorize payment for services, including out-of-network services or procedure for which a patient is not covered. This is an estimate of potential out of pocket costs, these prices are subject to change.