



Understanding the Financial Clearance Process

Helping you navigate the world of medical billing

Important Contact Information

Estimates

- 320-251-2700, ext. 53129
- Email: priceestimates@CentraCare.com

Financial Counseling

- 320-255-5616
- Email: financialcounseling@CentraCare.com

Customer Service

- 320-255-5622
or 800-835-6618



Like many people, you may worry about medical costs. Our teams help by providing financial information and the resources to plan for health care costs before, during and after your visit.

Financial clearance refers to the work done by CentraCare's prior authorization, estimate and financial counseling teams.

Prior Authorization

The prior authorization process begins when your doctor places an order for a test or service. This step ensures your health plan covers the service. At times, this may mean we need to send more information to your insurance company, such as previous tests completed. Your insurance company then reviews the medical need for the service requested. After review, your insurance company approves or denies the requested service. This is one of many reasons why it is important to tell CentraCare of any updates to your insurance information.

What to expect once your doctor has ordered a test/service:

1. If your insurance company requires authorization for the ordered service, the prior authorization team sends the request, along with supporting paperwork, to your insurance company.
2. If your service does not require prior authorization, your order is approved.
3. If your prior authorization request is denied, your doctor will receive notice. You most likely also will receive a notice from your insurance company regarding the denial.
 - Your doctor can appeal this decision, which CentraCare will do on your behalf. There is no guarantee the insurance company will change a denial due to an appeal.
4. If your service remains denied, you may want to postpone the service if it is not medically urgent/life threatening.
5. If you choose to continue with the denied service, our financial clearance team will give you an updated estimated cost. It is then up to you to decide if you wish to proceed.

Please know insurance companies can take 7-14 business days to decide on an authorization request once received. This assumes they have all needed information.

Your services may also need to be reauthorized if:

- The location of your service changes
- Your doctor changes
- Your insurance changes
- Your service is rescheduled
- You wait too long to schedule services after you receive an authorization

Please also note that any urgent authorization request must be deemed medically urgent by both your doctor and insurance provider.



What to Expect

An estimate is just that.

We cannot guarantee the amount you will need to pay. The estimate is not a binding contract for service or pricing. Many things affect your out-of-pocket costs:

- Your insurance coverage
- Co-pays
- Co-insurance
- Deductibles

Care received is based on your specific needs. If needed services change during your treatment, out-of-pocket costs may change.

Estimates

Based on the desired service, CentraCare's estimate team can calculate your potential out-of-pocket cost. "Out-of-pocket cost" refers to your share of covered health care costs, including the money you pay for copayments and towards deductibles.

- A copayment is a fixed fee decided by your insurance company to be paid prior to services.
- A deductible is a set amount that you must pay out of pocket before your health plan will begin to pay any benefits.
- We may ask if you'd like to make a prepayment on the amount estimated to be due after your services are submitted to insurance. Prepayments go towards your deductible and out-of-pocket maximum.
- Your out-of-pocket maximum is the most you will have to pay for covered health care services in a year.

You can request an estimate at any time for both scheduled and nonscheduled services. If you have insurance, you should first contact your insurance company and confirm coverage and out-of-pocket costs.

If you don't have insurance or if your visit will not be covered by insurance, our financial counselors can help. You may be eligible for Medicaid or financial assistance. For details, call [320-255-5616](tel:320-255-5616).

Our goal is to assist you in finding the best financial solution for your estimated out-of-pocket expenses. If we are unable to financially clear your procedure, you may need to re-schedule your visit.

Ways to pay your estimated out-of-pocket costs:

- View your estimate and pay your balance securely from your MyChart account at mychart.centracare.com.
- Call a financial counselor to pay by phone at [320-255-5616](tel:320-255-5616).

Financial Counseling

Our financial counselors can help if you want to discuss an estimate, need an explanation of charges, or if you have any questions or concerns. You can visit a financial counselor at various CentraCare locations or call us if you'd like to discuss ways to handle your financial responsibilities. We offer:

- Interest-free payment plans
- Medicaid screening
- Financial assistance screening

To reach one of our financial counselors, call [320-255-5616](tel:320-255-5616). Our financial clearance team may contact you before your service to discuss options and to assist you with paying estimated out-of-pocket costs.

After Your Visit or Procedure

After your insurance company processes the claim, you will receive a billing statement explaining what you owe. If your insurance company denies the initial claim or wants more information, an appeal process may delay billing.

For questions about your bill or this process, please call our customer service team at [320-255-5622](tel:320-255-5622) or [800-835-6618](tel:800-835-6618).