

## Maximum Reimbursable Charge

# Understanding your out-of-network claims

### Out-of-network care

Under your plan, you can visit doctors and other health care professionals who do not participate in the CIGNA network. When you receive non-emergency, out-of-network medical care, it's important to remember two things:

- Your share of the costs (e.g. coinsurance and deductibles) will be *higher* compared with what you'd pay for in-network care.
- You'll also be responsible for all charges *above* the **maximum reimbursable charge**.

### What is a maximum reimbursable charge?

When you receive **out-of-network medical care** from a **non-participating doctor or other health care professional**, there's a limit to the amount of money that will be reimbursed. For example, your doctor might charge \$100 for treatment, but the most your plan will pay is \$80. This amount is called the **maximum reimbursable charge**.

These charges are typical of the fees doctors in your geographic area charge for the same service. The nature and severity of your condition and any resulting complications are also considered.

### How is a maximum reimbursable charge determined?

When determining a maximum reimbursable charge, CIGNA considers the service fees charged by doctors and other health care professionals in your area. We also look at similar data provided by most other major U.S. health service companies.

### What if my doctor charges more than the maximum reimbursable charge?

When you or your doctor files a medical claim and we determine the doctor's fee exceeds the maximum reimbursable charge:

- Any amount your doctor charges *above* the maximum reimbursable amount will **not** be covered by your medical plan.
- Your doctor can bill you directly for the uncovered amount and you are responsible for payment.

### Know before you go

It makes sense to plan ahead. If you'd like to know *in advance* whether a proposed charge is within the CIGNA maximum reimbursable amount, call the toll-free number on the back of your ID Card. Please make sure you have the following information when you call:

1. The place of service (zip code)
2. The doctor's procedure code

### Staying in-network: a cost-effective option

When you receive in-network care, your doctor and CIGNA have already agreed on a fee that will be covered under your plan, so payment is *not* limited to the maximum reimbursable charge.



## Choosing a CIGNA Doctor

To find a participating doctor that best meets your needs, use the directory on [myCIGNA.com](http://myCIGNA.com). There, you'll find complete profiles, including education, languages spoken, hospital affiliations and detailed maps with directions. Online tools will also help you find estimated average cost ranges for common procedures, medical services and conditions.

## If you choose out-of-network care ...

- **Know your coverage.** Check your plan materials to verify that you have out-of-network coverage. Make sure you understand the details of your plan, including your deductible and coinsurance.
- **Know what you may be required to pay.** Even a simple trip to the doctor's office can cost you hundreds of dollars. Ask the doctor about billed charges for the services you may need.
- **Ask if price is negotiable.** Many doctors offer discounts on their services. Ask if they're willing to negotiate the charges. Think about getting a second opinion and another price.
- **Consider payment alternatives.** Ask if the doctor is willing to work out a payment schedule with you. If you have a Flexible Spending Account, apply that money toward out-of-network expenses.

## We're here for you 24/7/365

For answers to all your questions and concerns, call the toll-free number on the back of your CIGNA ID card or visit [myCIGNA.com](http://myCIGNA.com) whenever it's convenient for you. Remember, some services may require precertification, so be sure to call if you're unsure.



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