

# HOW TO USE YOUR HEALTH INSURANCE POLICY IN THE USA



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## DECIDE IF IT IS A LIFE-THREATENING EMERGENCY SITUATION

If that's the case: Go straight to the emergency room or call 911!



## IF NOT LIFE-THREATENING,

call OTH and explain why you need to see a doctor. One Team Health (OTH) is the claims administrator. Phone + 1 844 805 9444; Email: [oneteamhealth@dhig.net](mailto:oneteamhealth@dhig.net) They will refer you to an appropriate level of care medical provider in the [Aetna Passport to Health PPO network](#).

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Expect OTH to send you a [medical information release form \(HIPAA\)](#) to sign and return to them – do this ASAP.



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## VISITING A MEDICAL PROVIDER IN THE AETNA PPO NETWORK

If you visit a medical provider in the Aetna Passport to Health PPO Network you **must** show your medical insurance ID card. If they have any problem verifying your insurance or submitting your bill to Aetna Passport to Healthcare PPO, call OTH while you are there and show them the guidelines on your ID Card. If the medical provider belongs to this PPO network, they must submit the bill directly to the Aetna PPO.



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## NON-AETNA PPO MEDICAL PROVIDERS AND PRESCRIPTIONS

If you visit a medical provider who isn't in the Aetna PPO network, you may be asked to pay at the time of service. In this case, you must complete a [claim form](#) and mail the itemized invoices to OTH.

You must pay for prescriptions when you pick them up at the pharmacy. Ask the pharmacy counter if they can recommend a discount card (such as 'GoodRx') - they may have one you can use. Complete a [claim form](#) and submit it along with the detailed prescription receipt (includes your name, name of medication, quantity, strength, date purchased, and price) and receipt showing proof of payment.

## HOW WILL YOUR CLAIM BE PROCESSED?

OTH needs to verify the needed medical care is covered under the policy. If necessary, OTH will request your medical records from the medical providers. You can expedite this process by making sure you sign and return the [HIPAA form](#) to OTH and contacting your medical provider and ask they send your medical records to OTH as quickly as possible.



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OTH will notify you if they need additional information from you – such as a [claim form](#) or [accident questionnaire](#). Please provide this information to OTH as soon as possible.

If the medical provider sends you the bill, assume they did not correctly submit your bill to Aetna PPO. Immediately call the medical provider and provide them the guidelines which are listed immediately underneath your ID card for filing a claim. Once you have done this, also mail or email the bills to OTH. **DO NOT IGNORE THE BILLS.** Medical providers will continue to send monthly statements and eventually will send the bills to a collection agency.

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## WHAT HAPPENS AFTER OTH HAS PROCESSED THE CLAIM?

OTH will email you an explanation of benefits (EOB) detailing for each invoice how much was billed; how much was paid; and how much you are responsible to pay.

Understand that the policy does NOT cover all expenses. If applicable, you will be responsible to pay the policy deductible, copayments, coinsurance, and any charges excluded by the policy. Once processed, the medical provider will rebill you for any charges you are responsible to pay directly to the medical provider.

If you disagree with a denial of charges, you need to send a written appeal to OTH explaining why you feel the claim was incorrectly denied. Please submit additional medical information, if applicable, which could assist with the appeal.