How Could a Medical Bill Be a Surprise?

There are many people and places that provide healthcare services. Doctors, nurses, physician assistants, and other healthcare professionals are all healthcare providers, as are hospitals, surgery centers, and many other healthcare facilities.

Your health insurance plan may encourage you to use healthcare providers that are in network, and can help you identify providers in your network and provide information you may need. Being in network means that these healthcare providers have an agreement, or contract, in place with your health plan. The contract defines the amount providers will be paid for their services, which is also known as the negotiated rate. The contract also requires the health plan to pay the providers directly. If healthcare providers are not in network (“out-of-network”), it simply means that they do not have a contract or a negotiated rate with your health plan.

If a healthcare provider is not in network, you may have to pay more for their services. Also, your health plan may not always cover care that is not in network. Whether your health plan pays a provider who is not in network and how much it pays depend on the terms of your policy with your health plan. If the amount the health plan pays under your policy is less than what the provider charges for the service, the provider might bill you for the difference, or balance. This is a balance bill.

Some doctors who treat patients at hospitals that are in your health plan’s network may be “out of network” with your health plan. Read on for examples.

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**HEALTHCARE PROVIDERS**

Doctors, nurses, physician assistants, and other healthcare professionals. Also, hospitals, surgery centers, and many other healthcare facilities.

**NEGOTIATED RATE**

Amount that providers will be paid for their services. Health plans and providers have contracts that define these rates.

**BALANCE BILL**

When the amount paid by your health plan to an out-of-network provider is less than the provider’s bill, the provider might bill you for the difference.
As a consumer, you want to make sure that you are making decisions that help you avoid paying more than expected for healthcare services. If you can do so, you want to make these decisions before you have committed to a healthcare procedure or service.

Planning in advance will help give you peace of mind during your procedure. It can also lessen your chances of a surprise when you receive the bill for your procedure.

Many health plans also have an out-of-pocket maximum. This means that once you spend the maximum amount, you do not have any more cost-sharing responsibilities for services that your health plan covers. Cost-sharing responsibilities include things like deductibles, copayments, and coinsurance. But if you use a provider that is not in network, the amount you pay for that provider’s services may not count toward your out-of-pocket maximum. This means you might have to pay any cost-sharing responsibilities as well as any balance bills from the provider, even if you have reached your health plan’s out-of-pocket maximum.

You often have a chance to choose a healthcare provider in advance. The choice is yours, but it is very important that you understand whether that provider is in network and what that means in terms of the cost to you.

It is also important to understand that even if you choose a hospital that is in network, you may still receive care at that hospital from a doctor or other healthcare professional, such as a physician assistant or physical therapist, who is not in network. Just because a hospital participates in the health plan’s network does not mean that all the healthcare professionals you will interact with at the hospital are also in network. Just because a hospital participates in the health plan’s network does not mean that all the healthcare professionals you will interact with at the hospital also are in network. Similarly, your healthcare professional might be in network but refer you to receive services at a hospital or other facility that is not in network.

Sometimes you cannot choose a healthcare provider in advance. This is often the case when you need emergency care. In other cases, you may not be aware of everyone who will be providing services as part of your procedure. In these situations, you could receive an unexpected bill for out-of-network services.