

Thank you for choosing Kaiser Permanente for your care. We are committed to providing you with quality, affordable health care. We have prepared the following information to help you understand how we work together to make sure you have the information you need to meet your financial responsibilities for the care and services you receive.

### **Know which services your insurance will cover**

Health insurance coverage is a contract between you and your insurance company. It's best if you know which services your insurance will cover before you receive care. That way, there are no surprises for either of us. If you're not sure about your coverage, please ask your insurance company. Kaiser Permanente health plan members can call Member Services at 1-888-901-4636. For other insurance companies, please refer to the information on the back of your insurance card. If you have no insurance, or do not give us correct information, you will be responsible for the full cost of the services you receive.

### **Insurance billing**

- **Contracted coverage** Kaiser Permanente in the Puget Sound and Spokane contracts with several insurance companies in addition to our own plans. If we are in your health plan's network, our billing office will submit claims to your insurance company for the care and services you receive from us. You will be expected to pay any cost shares at the time of service.
- **Non-contracted** If Kaiser Permanente does not contract with your insurance plan, we will bill your insurance as a courtesy to you, and may ask you for payment at the time you receive care. You are responsible for the full cost of the care and services you receive. If you owe a balance, or if your insurance company does not pay your claim within 45 days, the balance will be billed to you.

### **Copayments, deductibles and other patient cost shares**

Please plan to pay your copayment at the time you receive care or services. This amount is based on your specific insurance plan. We will also ask you to pay any deductibles, money owed for non-covered services, and any other cost shares at the time of service. If you are not able to pay these amounts at the time you receive care or services, you will receive a bill. The total amount you owe might change after your appointment, depending on the actual care or services you receive. You are responsible for all or part of the charges, based on your coverage and insurance plan. It is important to know that even if a service is covered, your insurance plan might not pay the charges in full.

### **Care or services not covered by your insurance plan**

Not every service is covered by every insurance plan. Some or all of the care or services you receive might not be covered, or might not be considered medically necessary by your insurance plan. If that is the case, you will be responsible for the full cost. We will usually ask your insurance company to approve services in advance if there is any question about coverage. If you receive a service that is not covered, we will expect payment in full at the time of your visit.

### **Adult bringing a minor for care or services is financially responsible**

An adult who brings a minor (under 18 years of age) to Kaiser Permanente for care or services, or the parent or guardian, is responsible for any payments that are due at the time care or services are received. If a responsible adult is not present or payment has not been arranged in advance, treatment that is not urgent may be rescheduled.

### **Pharmacy charges**

Pharmacy cost shares are due and should be paid when your prescription is filled. The amount of your cost share is based on pharmacy coverage in your insurance plan. When you order prescriptions online you can pay using a debit or credit card.

### **Missed appointments**

If you miss an appointment, or do not cancel your appointment within a reasonable amount of time, we might charge you a cancellation fee, depending upon the type of service. Your insurance will not pay these fees. They are your responsibility and will be billed directly to you.

## **Billing**

Payment for all bills is due within 20 days. You may pay by check, debit or credit card, or online at [kp.org/wa](http://kp.org/wa). If we do not receive payment we will continue to send you bills until we receive payment in full. Unified Billing Service might contact you about your balance on behalf of Kaiser Permanente. If you fail to pay your bills, your unpaid balance will be referred to a collection agency as explained under Nonpayment below.

## **Unable to pay**

If you are having problems paying your bills, there are two options to help you.

- **Payment plan** Contact Patient Financial Services at 1-800-442-4014 to see if your account balance qualifies for a payment plan.
- **Medical Financial Assistance.** The Medical Financial Assistance program helps low-income, uninsured, or underserved patients who need help paying for all or part of their medical care. In general, patients are eligible for Financial Assistance when their Gross Household Income is at or below 300% of the Federal Poverty Guidelines (FPG) or they have unusually high medical costs. Talk with staff at any Kaiser Permanente facility business office or check-in desk to determine eligibility and for help applying, or call 800-992-2279 to request an application form.

The Medical Financial Assistance program covers medically necessary care provided at a Kaiser Permanente medical facility or pharmacy, or provided by a Kaiser Permanente provider.

## **Nonpayment**

If you are not approved for one of the programs described above, and you do not pay your bills within 30 days of receiving a delinquency letter, we will refer your unpaid balances to an outside collection agency. You will be responsible for any collection agency fees that apply. If we need to take legal action to collect your outstanding balances, you might be charged legal fees. These will not be negotiated or refunded. If you have large unpaid collection agency balances and have made no payments, we might report you to a credit bureau and deny you any additional care or services from Kaiser Permanente. If this happens, we can help you transfer your care to a non-Kaiser Permanente provider.

## **Returned checks**

Kaiser Permanente accepts personal checks as a form of payment. If three or more checks are returned by your bank for insufficient funds, we will ask you to use a different payment method, such as a credit or debit card, for future services and payments on your account.

## **Overpayments**

Before we refund a credit balance or overpayment on your account, we will apply that amount to any outstanding balances for you or any dependent covered by your health care plan. We will refund you for any remaining credit balance.

## **Consent to contact**

When you receive this Patient Financial Responsibility policy at Kaiser Permanente and sign the Acknowledgement of Receipt, you consent to being contacted by Kaiser Permanente or any organization to which Kaiser Permanente assigns your account, about any matter related to your account, using current contact information or any new information that you provide. We might contact you by U.S. mail, email, or telephone, including cell phone, and might use technology including auto-dialing and/or pre-recorded messages to contact you.

## **Questions?**

Please contact Patient Financial Services at 1-800-442-4014 if you have questions about anything in this policy.