

MY FIRST HEALTH NETWORK

The First Health Network Answers Your Questions

When it comes to your health plan network, you should have doctors and hospitals when and where you need them. With the First Health Network, you'll have this and much more. The following provides answers to some basic questions, which can help you understand your network benefits.

Why would I want to use a doctor or hospital that participates in the First Health Network?

When you use a provider participating in the First Health Network, you pay less out of your own pocket for covered services. Plus:

- Network doctors are carefully selected to promote quality outcomes.
- Network providers are located throughout the country.

Be sure to show your medical ID card with the First Health Network logo on it whenever you visit your doctor or hospital. It identifies you as a participating plan member.

How can I be sure that my doctor will send me to a hospital, lab, specialist or other health care professional that participates in the First Health Network?

While we encourage doctors to refer their patients to other network providers, this may not always happen. (This includes the doctors who treat you in hospitals.) Therefore, always call your doctor's office to verify that he/she participates in the First Health Network before you seek care.

Am I responsible for precertifying a hospital admission?

Either you or your doctor can precertify your admission by calling the toll-free number listed on your ID card. You should call prior to any scheduled (nonemergency) admission or on the first business day after any emergency admission.

Do I need to file my own claim?

No, you don't need to file a claim when you get medical care from a network doctor or hospital, however you may be required to file a claim if you see a non-network provider for your care.

What if a provider requests full payment "up front" or will not submit the claim for me?

At the time of your office visit, you are only responsible to pay for your co-payment (deductible/coinsurance, if any). If a network provider asks that you pay more than your co-payment or refuses to submit the claim for you, it is probably because the office personnel do not realize that you are eligible to access the First Health Network or they are not fully aware of their procedures. Make sure to identify First Health as your network. If the provider still does not follow the First Health procedures, call the First Health Network for assistance.

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What if I get a bill in the mail from the doctor?

If your co-payment was not made at the time of your service, the provider will send you a bill in the mail. You may also get a bill simply because many providers routinely send the patient a bill until payment is received from their health plan. These bills often indicate that the insurance company has been billed.

Will I get billed for the difference between the billed charges and the First Health Network rate?

No, you should not get billed for the difference between the provider's billed charges and the First Health Network discounted rate. If this occurs, call the doctor's office or call First Health.

Where do I call for more information?

If you have questions or concerns regarding a specific claim, your eligibility or benefits, please call the number on your ID card. For all other inquiries regarding providers, please call First Health customer service at 800.226.5116.