

KNOW BEFORE YOU GO: THE COST OF A HOSPITAL VISIT

A STAY IN THE HOSPITAL ISN'T FUN. What's even worse is receiving your Explanation of Benefits (EOB) when you return home and finding out you have out-of-pocket costs you weren't expecting. The next time you find yourself or a loved one in need of a procedure that requires a hospital stay, be sure to ask these questions to help understand your cost share.



1 Do I have benefits for this procedure?

Health coverage varies from person to person. To help you understand your cost share before getting your EOB, always check your benefits.

HOW DO I FIND OUT?

Use the **My Benefits** tool on myWellmark. This tool will help you understand the services that are covered under your health plan. You will also find cost sharing amounts, such as copayments, deductibles and out-of-pocket maximums. This will help you understand how much of the cost you will be responsible for.

You can also call Wellmark Customer Service to confirm your benefits. Just call the number on your Wellmark ID card.



2 Are the health care providers handling the procedure in my network?

Using an in-network provider means you'll pay less out of pocket for care, compared to an out-of-network provider. Using an out-of-network provider not only costs you more, it drives up overall health care costs.

HOW DO I FIND OUT?

Use the **Find a Doctor or Hospital** tool on myWellmark. Simply go to Wellmark.com, log into myWellmark, and select a directory based on your network. Your network is listed on the front of your Wellmark ID card.



3 Does this procedure or service need to be approved ahead of time?

There are some procedures that require prior approval. Prior approval helps determine if a proposed treatment plan is medically necessary and follows nationally-approved medical guidelines.

HOW DO I FIND OUT?

For a list of services that require prior approval, visit **Wellmark.com** and follow this path: Member > Using Your Benefits > Pre-Service Review Requirements. The website will explain what the pre-service requirement is, when it's needed and why it's important to you. If your procedure requires prior approval, speak with your provider, who will request a prior approval for you.



4 If I am going to be admitted to the hospital, do I need to notify Wellmark first?

On occasion, Wellmark needs to be notified about hospital admissions. By notifying Wellmark in advance, we can ensure you benefit from the latest evidence-based treatment options, avoid unnecessary services and provide you with the information and support you need to take charge of your health.

HOW DO I FIND OUT?

For a list of hospital admissions that require notification, visit **Wellmark.com** and follow this path: Member > Using Your Benefits > Pre-Service Review Requirements > Notification. If you are visiting an in-network provider in Iowa or South Dakota, the facility will notify Wellmark. If you're receiving care from a facility outside of Iowa or South Dakota, you will need to notify Wellmark by calling the precertification phone number on your Wellmark ID card. Be sure to check your benefits to make sure you have out-of-state coverage. If you have any questions or concerns about notification, contact Wellmark Customer Service.



5 Does my prescription require prior authorization?

For some prescriptions, your provider will need to get approval from Wellmark before they can be filled. Your provider will need to do this for you.

HOW DO I FIND OUT?

There are two easy ways to find out if your prescription requires **prior authorization**:

- > Visit **Wellmark.com** and follow this path: Health and Wellness > Drug Information > Pharmacy Programs.
- > **Access the Wellmark Drug List.** Simply select your drug list from the dropdown and enter the medication name. The Wellmark Drug List will list any special requirements associated with a prescription drug, not just prior authorization.



Wellmark can help you navigate the health care system and get the most out of your health care benefits.

Go online to myWellmark at Wellmark.com and choose:



My Benefits to understand which services are covered under your plan.



Find a Doctor or Hospital to help save money by going to an in-network provider.



Patient Review of Providers to share your experience with your provider, as well as review feedback from other patients.



Check Drug Cost to get the most out of your prescription drug spending.

Rather give us a call? Dial **844-84-BEWELL** to connect to **BeWell 24/7SM**. Speak with a real person who can help you with a variety of health-related concerns. For example:

- > Discuss treatment options and answer your health and wellness questions.
- > Coordinate health care appointments, in-home health help and record retrieval.

Wellmark complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: Si habla español, los servicios de asistencia de idiomas se encuentran disponibles gratuitamente para usted. Comuníquese al 800-524-9242 o al (TTY: 888-781-4262).

注意：如果您说普通话，我们可以免费为您提供语言协助服务。请拨打 800-524-9242 或（听障专线：888-781-4262）。

ACHTUNG: Wenn Sie deutsch sprechen, stehen Ihnen kostenlose sprachliche Assistenzdienste zur Verfügung. Rufnummer: 800-524-9242 oder (TTY: 888-781-4262).



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