FAQ's

1. Who is this provider?

a. Our providers deliver care in Emergency Rooms, Inpatient Hospitals, Anesthesiology, Clinics and Virtual Care.

2. Why am I receiving this bill?

a. This bill is for the medical care you received from a provider during your recent healthcare visit. This bill is for the provider portion of your visit. You may receive a separate bill from a facility or other healthcare providers such as radiology, labs, specialists, etc...

3. Why did I receive separate bills for my visit?

- a. You may receive two bills for the same hospital visit. However these bills are for different services- The hospital bill covers charges for facility and nursing services, equipment, medication and supplies. The provider bill is from the provider group, and it covers the professional charges for the provider's services. Because the provider is an employee of the provider group and not the facility their charges are on a separate bill.
- 4. I received a text message or an email and it looks like spam, what information is released in a text/email?
 - a. No personal health information (PHI) is released in the electronic notifications, and all notifications are secure.
- 5. I received a text message or email and I did not give you permission to contact me via electronic message
 - a. At the time of treatment the forms that were filled out at the facility gave authorization to contact the patient by text or email. If you no longer wish to receive notifications through these methods you may visit to pay.teamhealth.com and update your notifications settings.

6. Why am I receiving a bill if I have insurance?

a. If we submitted a claim to your insurance, your insurance company will determine the benefits of your plan, including your responsibility. This bill reflects the amount your insurance has determined is your responsibility.

7. Why have you not filed my insurance?

- a. If you have insurance and we do not have it on file there are multiple ways to provide us with this information. From pay.teamhealth.com you can provide us your insurance information by entering it directly once logged in, via chat, or by calling our customer service call center.
- **b.** Once your insurance is provided we will submit a claim to your insurance company. After they have provided us with an explanation of your benefits (EOB) including your patient responsible balance (Deductible, Co-Pay, Co-Insurance) we will send you an updated bill.

8. What should I do if my services were related to an injury at work?

a. If you have received an invoice for total charges related to workplace injuries, we likely need information on where to send the claim. Please contact us to provide the insurance company name, address to send the claim, and claim number.

9. What information is needed to bill my insurance?

a. The insurance name, the insurance claims address, the policy/claim number, and policy holder name will need to be provided in order to file a claim to the insurance. This information should be found on the insurance card.

10. My insurance company said that this provider was out-of-network. Is this a surprise bill?

- a. Your insurance determines that amount the patient owes to the provider according to your benefits plan. Our bill for your portion should match what the payer indicates is your responsibility. Please contact your insurance for more information on the amount they deemed to be your responsibility. Your bill should include amounts indicated by your insurance plan as copay, coinsurance and/or deductible. When you get emergency care or are treated by an out-of-network provider at an in-network hospital or ambulatory surgical center, you are protected from balance billing, sometimes called surprise billing.
- **b.** If you believe this balance to be an error please contact your insurance company at the phone number displayed on the back of your insurance card.

11. How do I know if the provider I see is in my network?

a. Before visiting the facility contact your insurance to confirm if the provider group is in your network.

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- 12. How can I get an itemized statement of everything that was done to me during my visit?
 - a. Contact the facility and request a copy of the medical record. This will include any and all treatment you received during your visit.
 - **b.** For an itemized statement regarding this bill, go to pay teamhealth.com or contact our customer service center.

13. How do I know this is not a scam?

a. Review the service details including patient name, the date of services, facility and location of services. If the patient was not treated for this service, please contact us at our customer service center.

14. Why am I being charged for a provider and I only saw a nurse?

- a. You may have been seen by a provider assistant, nurse practitioner, or nurse. They provide care under the direct supervision of a doctor.
- **b.** You may not see the attending provider directly, but they determine and guide the care and approve the treatment you receive.