



How the Program Works

- 1 At your appointment, present your medical plan ID card and expect to receive care**
 - The receptionist, office manager, billing manager or representative needs to look at the back of the ID card to find the claims submission address and Electronic Payor ID for HealthSCOPE Benefits. Unfortunately, missing this simple step can create unnecessary stress.
 - You can confidently say, **"I have benefits through my employer and MY PLAN WILL PAY."**
- 2 If your provider has questions about your health plan, ask them to call 1-888-330-7295 to speak with ClaimDOC**
 - ClaimDOC will educate your provider.
 - If necessary, ClaimDOC can work with your provider to arrive at a mutually beneficial patient agreement for a specific procedure or specific period of time.
- 3 Do not pay anything more than an applicable co-pay at the time of service**
 - You are **ONLY** responsible for any applicable co-pays, deductible and co-insurance up to your out-of-pocket maximum for the plan year.
 - If a provider asks you to sign Patient Responsibility documents at time of service:
 - Review for a specific dollar amount:** If an amount is found, please call ClaimDOC to ensure if the amount listed is your true Patient Responsibility.
 - If there is no specific dollar amount:** You can sign or skip that section of the document.
- 4 After your appointment, your role is to open your mail and communicate**
 - If you receive a bill for anything more than your Patient Responsibility call 1-888-330-7295 to speak with a ClaimDOC Member Advocate. You can locate your Patient Responsibility on the Explanation of Benefits (EOB), sent to you by the plan administrator.
 - Please monitor your mail and forward any communication that appears to be collection efforts by the provider in excess of the Patient Responsibility identified in your EOB. ClaimDOC is happy to assist you with interpreting any invoice you receive from a provider.
 - In the event there is a dispute following payment, ClaimDOC works directly with the provider to understand their position and keep your involvement limited.

IT IS IMPORTANT TO READ ALL DOCUMENTS GIVEN TO YOU BEFORE ADDING YOUR SIGNATURE.

**ClaimDOC will vigorously defend you and your plan against unfounded collection activity.
YOU ARE NOT RESPONSIBLE FOR THE AMOUNT IN EXCESS OF YOUR PATIENT RESPONSIBILITY.**

- You are protected by state and federal debt collection laws. In the event a member experiences a violation of these laws, ClaimDOC will provide the necessary defense and guidance.