Maximum Reimbursable Charge

Understanding your out-of-network claims

Staying in-network: a cost-effective option

When you receive in-network care, your doctor and CIGNA have already agreed on a fee that will be covered under your plan, so payment is not limited to the maximum reimbursable charge.

Out-of-network care

Under your plan, you can visit doctors and other health care professionals who do not participate in the CIGNA network.

When you receive non-emergency, out-of-network medical care, it's important to remember three things:

- Your share of the costs (e.g. coinsurance and deductibles) will be *higher* compared with what you'd pay for in-network care.
- You'll also be responsible for all charges above the maximum reimbursable charge.
- Any amount above the maximum reimbursable charge does not apply to your out-of-pocket maximum or deductibles.

What is a maximum reimbursable charge?

When you receive out-of-network medical care from a non-participating doctor or other health care professional, there's a limit to the amount of money that will be reimbursed. For example, your doctor might charge \$100 for treatment, but the most your plan will pay is \$80. This amount is called the maximum reimbursable charge.

How is a maximum reimbursable charge determined?

A maximum reimbursable charge is determined in one of two ways:

- 1. Using a percentage of the Medicare reimbursement fee schedule.
- For some covered services, a Medicare reimbursement schedule is not available. In these cases, the maximum reimbursable charge is based on what other doctors in your area typically charge for the same service.

What if my doctor charges more than the maximum reimbursable charge?

When you or your doctor files a medical claim that exceeds the maximum reimbursable charge:

- You are responsible for paying any charges above the maximum reimbursable amount. These charges don't apply to your out-of-pocket maximum or deductibles.
- Your costs for out-of-network covered services could be high.

Know before you go

It makes sense to plan ahead. If you'd like to know *in advance* whether a proposed charge is within the CIGNA maximum reimbursable amount, call the toll-free number on the back of your ID Card. Please make sure you have the following information when you call:

- 1. The doctor's name and tax ID number
- 2. The place of service (zip code)
- 3. The doctor's procedure code

If you choose out-of-network care...

Know your coverage. Make sure you understand the details of your plan, including your deductible and coinsurance.

Know what you may be required to pay. Even a simple trip to the doctor's office can cost you hundreds of dollars. Ask the doctor or facility about their billed charges for the services you may need.

Ask if price is negotiable. Many doctors and hospitals offer discounts on their services. Ask if they're willing to negotiate the charges. Think about getting a second opinion and another price.

Consider payment alternatives. Ask if the doctor or facility is willing to work out a payment schedule with you. If you have a Flexible Spending Account or a Health Savings Account, apply that money toward out-of-network expenses.

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