

PIBT freedom -FAQ

This Q&A answers the most frequently asked questions about the PIBT Freedom Plans.

1. Are PIBT Freedom Plans the right choice for me?

These plans are a good choice for you if:

- You want to control your costs
- You prefer to choose your provider
- You like the idea of having an advocate help you navigate the healthcare system
- You are willing to be engaged with your health plan occasionally

2. Who administers the PIBT Freedom Plans?

PIBT designed the plans and their benefits and engaged GPA and ELAP to administer and manage claims under the Freedom Plans.

- GPA is a third-party administrator who manages claims and provides support teams to advise members including Nurse Navigators and HealthWatch.
- ELAP audits and settles claims from facilities such as hospitals and outpatient centers. Both companies work on behalf of PIBT. In all cases, the staff of PIBT is always here to assist you. You should never hesitate to call us.

3. What doctors and other healthcare providers can I use?

Virtually all practitioners accept this plan. Although these plans use a national network, MultiPlan PHCS Practitioner and Ancillary network, that includes physicians, labs, urgent care and similar types of providers, you are not restricted to this network and your benefits are the same whether you seek care from a preferred or non-preferred practitioner.

If you are looking for a new doctor, we recommend that you check the MultiPlan PHCS Practitioner and Ancillary network and select a suitable doctor from the list. You may also ask GPA's Nurse Navigator to find the top practitioners in your area for the medical issue you have.

If you know which doctor you want to see and they are not in the network, bring along your new ID card and your GPA Practitioner Guidance Flyer. If they still have questions, ask them to call GPA. We will explain how our plan works and get you seen. **If you know which doctor you want to see and they are not in the preferred network,** bring along your new ID card and your GPA Practitioner Guidance Flyer. If they still have questions, ask them to call GPA. We will explain how our plan works and get you seen. It is very rare that we are unsuccessful.

For facilities - like hospitals, outpatient facilities, and surgical centers - there is no network. You may go to virtually any facility you choose. If they need to contact GPA to confirm your coverage, the information for them to contact us is on your ID card. If you like, you may contact GPA prior to any appointments, and we will contact the doctor or facility to make sure there are no problems when you arrive for your appointment.

Note that certain healthcare providers and facilities, Kaiser for example, only treat patients who are part of their health system. Kaiser will typically not accept the PIBT Freedom Plans except for emergency medical conditions.

4. What if a healthcare provider says they don't recognize my insurance plan?

Give them the GPA Practitioner Guidance Flyer which should answer their questions. If they still have questions, ask them to call GPA at the number on your ID card. We are almost always able to work out a solution for you and get you seen and treated. Although very rare, if a solution can't be found with your provider, a Nurse Navigator will locate other top-tier provider options for you to select from for your medical services.

5. What if a healthcare provider asks me to pay upfront?

Call GPA immediately, even if you are in the provider's office. You should not pay any amounts higher than your plan co-pay, coinsurance or deductible, depending on the type of treatment you are receiving. We will explain to the provider how our plan works and get you seen without an upfront payment higher than these amounts. Again, it is very rare that we are unsuccessful.

6. Who can I turn to with questions or for help?

The staff at PIBT can answer many of your questions related to eligibility, benefits and various administrative issues. GPA also has Member Services Professionals who are available to answer more detailed questions.

One of the most valued resources provided under the Freedom Plans is GPA's **Nurse Navigator**. These advocates are available to help you:

- Navigate the complex healthcare system
- Find the best healthcare providers in your area
- Better understand a diagnosis and learn about treatment options
- Ensure your physician's office understands the plan and you get seen
- And much more

7. What happens if a healthcare provider doesn't accept the payment amount and bills me for the balance?

Balance bills do not happen very often, but if you receive a balance bill, send it to us or ELAP directly as soon as possible. You will be contacted within 24 hours by an ELAP Member Advocate who will work closely with you until the balance bill is resolved. Our commitment to you is that, if you follow our process, you will only be responsible for co-pays, deductibles and co-insurance based on your chosen health insurance plan. If the bill is sent to collections, your assigned legal representative will contact the collection agency to remove you from the process, and then work with the collection agency to resolve the bill so that your credit is not impaired.

8. Are these plans HMOs, PPOs or POS plans?

These plans are PPO level benefits, but you can seek care at virtually any provider. The MultiPlan PHCS Practitioner and Ancillary network gives you an excellent starting point. You can check to see if your current doctor is there, or you can find a new doctor, but ultimately you are free to seek care at any provider that you choose.