Information for Members of Connecticut Insurance Plans: Surprise Bills

What is a surprise bill?
A surprise bill is a bill you receive for covered services performed at a network facility by an out-of-network provider. A bill is not considered a surprise if you agreed to see an out-of-network provider or you received emergency services.

What is an out-of-network provider?
An out-of-network provider is a doctor, health care professional, or facility (like a hospital or ambulatory surgery center) that isn’t part of your plan network. You may pay more for services you get from out-of-network providers.

What happens when I use an out-of-network provider?
Your costs may be higher. A facility must let you know if any out-of-network providers will be involved in your care. If you’re not told, you will only be responsible to pay your in-network deductible, co-pay or co-insurance amount. A surprise bill doesn’t include a bill for health care services when you agree to see an out-of-network provider.

If I go to a network hospital, will all of the providers be in the network?
Maybe. Sometimes, specialists like anesthesiologists, radiologists or pathologists are not part of your network. For example, if you go to a network hospital and get an X-ray, the doctor reading the X-ray may not be in the network.

How do I make sure I receive care from a network provider?
When receiving care, please make sure to ask that all services you receive are from network providers. You should also confirm that any new doctor or health care provider is in the network for your plan.
To find a network provider:
• Log in to myuhc.com® and select “Physicians & Facilities”; or
• Call the toll-free member phone number on your health plan ID card, and we’ll be happy to help.

How much will I be responsible to pay for surprise bills?
For a surprise bill, you will be responsible to pay your in-network deductible, co-pay or co-insurance amount. We may initially pay the claim at the out-of-network level.

What should I do if I get a surprise bill?
If you get a bill from an out-of-network provider and believe it is a surprise bill, do not pay the provider. Call the member phone number on your health plan ID card.
If we determine it is a surprise bill, we will pay any remaining covered expenses and send you an updated Explanation of Benefits (EOB). The EOB will show any costs you are responsible for paying, as if the services were from a network provider.
If we determine it is not a surprise bill, we may try to negotiate with the provider or pay an additional amount to resolve the claim. If we pay more, we will send you an updated EOB showing any remaining costs you are responsible for paying for the provider’s services.