

Balance Billing for out-of-network services

It is important that you get your health care services from providers in your health plan's network.

If you receive care from an out-of-network provider, you may have to pay additional charges. These charges may be more than the amount you owe for your deductible and coinsurance and could be higher than your health plan's **allowed amount** for that service.

Your health plan will pay the amount that is identified as **UCR**. However, if there is a difference between what the provider bills and what your health plan pays, your provider may bill you for the difference. This is what is known as **Balance Billing**, and these charges do not apply to your health plan's maximum out-of-pocket costs.

To avoid balance billing charges, you should see providers in your health plan's network.

Visit QuartzBenefits.com/FindADoctor to see which providers are included. If you have any questions, call Quartz Customer Success at **(800) 362-3310**.

TERM DEFINITION

Allowed amount: The agreed-upon rate that your health plan pays providers in your network to care for you.

UCR: Stands for "usual, customary and reasonable", and is what the health plan uses to compare the costs for a similar medical service with other providers in the area.

Balance Billing: Additional charges you may owe for care received from an out-of-network provider.

Example of Balance Billing



You see a provider for a routine office visit and that provider is not in the Quartz network. The provider submits a bill for the visit to Quartz for **\$450**.



Quartz reviews the bill and determines that the **UCR** charge for similar services in that area is **\$350**, and pays the provider that amount.

The provider will then bill you **\$100** for the difference (**Balance billing**).