

# FREQUENTLY ASKED QUESTIONS (FAQS)

## Change of Address

- **I have recently moved. How do I update my information with my new address?**

*Contact your Human Resource Department and Custom Benefit Administrators and advise us of the change.*

## ID Cards

- **How do I request an additional ID card for myself, my spouse and/or college child(ren)?**

*You can request additional identification cards by clicking on “resources” on the left side of the page and the “Request ID card button” or call Custom Benefit Administrators.*

- **What should I do if I have a doctor’s appointment in the next few days and have lost my ID card?**

*Call Custom Benefit Administrators to verify coverage and order a new ID card. Advise your provider of the name of your third party administrator, Custom Benefit Administrators, the telephone number, 608-784-2442, your certificate number and your PPO network. Your provider can call us to verify coverage prior to or at the time of the appointment.*

## Private Health Information

- **Who can view the online information?**

*In accordance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), your login to this system as the policy holder, allows you to view your claims and the claims of your dependents under the age of 18. Your spouse and dependents over the age of 18 will need to obtain their own logins to gain access to their own claims online. Contact Custom Benefit Administrators for more information.*

- **What is your Privacy Policy?**

*A copy of Custom Benefit Administrators Privacy Policy is available by contacting Custom Benefit Administrators.*

## Coverage Concerns

- **If my network provider sends me to an out of network laboratory, x-ray facility, specialist, surgeon or other provider, will this be covered as in-network?**

*Contact Custom Benefit Administrators for benefit information or reference your Summary Plan Description (SPD). Since physicians participate in many networks and in a wide variety of plans, it is the patient's responsibility to make sure that any services that he or she receives are provided by in-network providers. You can verify any provider's participation by calling the customer service department at the network, checking the network website or by confirming directly with the providers office.*

- **If traveling outside of the country will I have medical coverage and how should I handle a medical emergency?**

*Please reference your Summary Plan Description (SPD) for out-of-the-country coverage or contact Custom Benefit Administrators. If coverage is available be prepared to pay for the service in full at the time that the service is rendered. Obtain a receipt with as much information as possible including procedures, diagnosis and name and address of the provider. The charges will need to be in United States currency. If you use a credit card, this will be shown on your credit card statement. Submit the claim(s) to Custom Benefit Administrators.*

- **How do I find out if a certain procedure (surgery) is covered and if it requires pre-certification?**

*Contact Custom Benefit Administrators for questions regarding the specific procedure (surgery), and to find out if there are pre-certification requirements or if the particular surgery is a covered benefit under the plan.*

- **I have an appointment with my doctor. What if the Doctor wants to do some testing or surgery? How do I know if, what and how much will be covered under my medical plan?**

*Every plan is a little different. The best source for finding out if a service requires pre-certification is your Summary Plan Description (SPD) or call Custom Benefit Administrators.*

- **Who is responsible for obtaining pre-certification for a planned service?**

*The ultimate responsibility lies with the patient or the parent if the patient if the patient is a minor. But, often the admitting doctor will initiate the pre-certification. To verify pre-certification has been completed, please call the precertification number printed on your medical ID card.*

- **What do I do in an emergency situation?**

*In case of an emergency, seek emergency care. No pre-certification is needed for an emergency room visit. Please contact the pre-certification company printed on your ID card within 24 hours if admitted to the hospital.*

## Finding a Provider

- **How do I find out if the provider is in my network?**

*You can verify any provider's participation by calling the Customer Service Department at the network, checking the network website or by confirming participation directly with the provider's office.*

- **Can I search for a provider online?**

*Yes, but you must first recognize the network of doctors and hospitals that you have access to – your Preferred Provider Organization (PPO). You will find the PPO's name on your medical ID card. Should you have trouble identifying the PPO, the website or the network's Customer Service Department, Custom Benefit Administrators will be happy to assist you.*

- **When looking for a network doctor/hospital is there a particular mile distance from my home that I need to use?**

*No. Most networks allow you to search for a provider based on mileage from your home or other zip code. After you have checked with your network to see if the providers are locally available, call Custom Benefit Administrators if you still have questions.*

- **Does Custom Benefit Administrators provide a directory for certain networks?**

*Very few networks still offer hard copy directories since they are constantly changing. Instead, most networks now offer enhanced capabilities on their specific websites. This includes verifying a provider's status, searching for a provider by specialty and/or location and in some cases, even supplying driving directions to the provider's office. If a link to the website is available it will be found under the "**provider source section**". If no link is found please contact Custom Benefit Administrators.*

- **How do I verify that a doctor I was referred to is an in-network doctor?**

*You should always confirm that the doctor or facility that you are being referred to is a participating provider in your specific network. You can do this by calling the network's Customer Service Department or by checking its website.*

## Referrals

- **Since I have a PPO for my health insurance, do I have to ask for a referral from my family doctor to see a specialist?**

*No, with a typical PPO program you do not need a referral to see a specialist. However, you should tell your family doctor or other physician what network you belong to and check with your specific network to verify that the physician you will be seeing is in network.*

## Appeals

- **How do I appeal the way a claim was processed (paid/denied)?**

*Please refer to your Summary Plan Description (SPD) for information regarding the filing of an appeal.*