

KNOW YOUR INSURANCE BENEFITS

Know Your Insurance Benefits



CarePoint Health
Emergency Department

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You are protected!

Don't let your insurance company scare you. You are protected by NJ state mandate in an emergency. When you or a loved one is experiencing a medical emergency, the last thing you want to worry about is insurance status. Now you don't have to.

- **Under NJ law, emergency room visits are ALWAYS in-network. In an emergency, you are protected.***

New Jersey law and regulation states that when a patient is seen for emergency services, NJ insurance companies are required to hold the patient harmless. That means that your insurance company is legally obligated to only hold you responsible for your in-network, out of pocket amount. This state mandate applies to any inpatient admission resulting from an emergency room visit. CarePoint Health will bill accordingly to hold your insurance company to this NJ State regulation. For more information about this state mandate, visit: http://www.state.nj.us/dobi/division_insurance/managedcare/mcconrights.htm

**Not all plans issued in the state of NJ are governed by NJ law. Certain employer sponsored plans may fall under Federal ERISA law. Coverage for Emergency services for these plans should be clearly defined in your summary of benefits. If you have any questions regarding your coverage, we encourage you to contact your insurance carrier.*

CarePoint Health accepts all insurances.

In the ER setting, all patients have access. It isn't a matter of "accepting" or "participating" with your insurance company. In accordance with NJ law, emergency patients are always treated as though we participate with your insurance company.

- **For information or appointments regarding elective services, please contact our CarePlus team at 201-884-5329.**

Q: How are medical emergencies treated when out of network?

A: In nearly all circumstances, the insurance carrier is obligated to limit the patient's financial responsibility to the same benefit amount they would be responsible for at an in-network provider. This is to protect patients in a medical emergency to ensure they receive access to the closest, most appropriate care in the event of a medical emergency, regardless of network status.

Q: I received a bill following services at CarePoint Health and I suspect it was not paid correctly by the insurance or the balance I owe is not correct.

A: If you receive a bill for any amount that does not seem correct, do not pay the balance. First, please contact the Insurance Help Desk at 866-600-3100 so that we may review the account and balance with you and, if necessary, with your insurance carrier, to ensure that the statement is accurate per the services received and the applicable insurance benefit level.

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Q: CarePoint Health is non-participating with my insurance carrier, I arrived to the emergency room, and now my physician wants to admit me to the hospital. Will my stay be covered?

A: Yes, your stay will be covered. When there is a medical necessity to be admitted to the hospital following a visit to the emergency room, in nearly all cases, your insurance carrier is required to limit your patient responsibility to the same amount you would otherwise pay at any other participating provider.

Q: I still have questions; who can I speak to?

A: For any patient inquiries that may not be addressed above, please refer to the Insurance Help Desk at 866-600-3100. The Insurance Help Desk is equipped to answer any patient billing or insurance questions and can also escalate resources for unique issues.

