## **Understanding Your Out-of-Network Coverage**

We understand that choosing a care provider is an important decision. Because you are currently receiving or considering care from a facility/provider outside of Quest's network, we want to ensure you are fully informed about what that could mean for your coverage and costs.

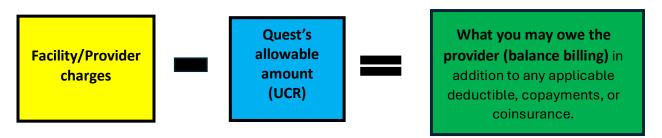
## Out-of-Network Coverage – What It Means for You:

If a facility/provider charges more than what Quest allows, you may receive a bill for the
difference. These additional charges, known as balance billing, do not count toward your deductible
or out-of-pocket maximum.

## What You May Be Responsible to Pay:

Out-of-network facilities/providers do not have a contract with Quest, which means:

- The facility/provider may "balance bill" you for the difference between their billed charges and Quest's allowable amount (usual and customary rate (UCR)).
- Quest determines allowable amounts (UCR) for out-of-network services, including outpatient therapy and inpatient admissions, based on factors such as location, licensure, and service type.
- For inpatient services, allowable amounts (UCR) are determined for room and board, as well as professional fees. Ancillary services, such as pharmacy, laboratory, radiology, or pathology services, are not reimbursed.



## **Tips to Help You Plan**

- 1. Providers must be licensed in the state in which the member is located at the time of service.
- 2. **Have more questions about your out-of-network coverage?** Call Quest at 1-800-364-6352. Our team is here to explain your coverage and answer any questions you may have.
- 3. **Use in-network providers.** In-network care helps you avoid unexpected costs and ensures better coordination of services. To find in-network providers and facilities, visit our online directory at www.questbh.com.
- 4. **For outpatient therapy:** Ask your provider what their session rate is and if they balance bill. Check whether other charges may apply, such as assessments or reports, and request a cost estimate in writing.
- 5. **For inpatient treatment**: Ask the facility about their daily room rate, whether they balance bill, and what additional ancillary charges may apply (e.g., labs, pharmacy services). Be sure to ask for a written estimate. Only services that meet medical necessity criteria will be considered for coverage under your plan. If the facility offers discounts or financial assistance, be sure to get those details in writing.

Please contact us for assistance in another language or with accessibility: Quest Behavioral Health 1-800-364-6352.

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