

# THE D A CARE™

AT HOME

P.O. BOX 469 NEENAH, WI 54957  
1-800-984-5554 or 920-969-0919

## FINANCIAL POLICY

As a DME (Durable Medical Equipment) provider, ThedaCare At Home (TCAH) is committed to providing our customers with a valuable service in meeting their healthcare needs.

Please be advised of ThedaCare At Home's financial policy and what this means to you.

1. As a courtesy to you, TCAH will bill 100% of the charges to your insurance company (for insurance billable items) if complete insurance information is provided to our office.
2. TCAH will follow insurance company guidelines in performing benefit checks and pre-notification. This does **NOT** guarantee payment nor does it absolve you of financial responsibility. Since your contract/benefits are between you and your insurance company, our office cannot negotiate a settlement on a disputed claim.
3. **Insurance may not pay for all of your healthcare costs even when the product/service is prescribed/ordered by your physician.** You are ultimately responsible for all co-pays, deductibles and non-covered or denied products/services.
4. We make every effort to obtain appropriate payment from your insurance company in a timely manner. Due to certain regulatory requirements of your insurance plan, additional information may be required from your prescribing provider before we can submit your claim for consideration. This may cause a delay in processing your claim. For further information about the status of a claim, you can contact our DME billing office.
5. Upon final processing of your claim(s), any remaining balance due will be moved to Patient Balance and reflected with your monthly statement from TCAH.
6. All dollars that appear on your statement in the Patient Balance Column are due within 16 days. If you anticipate that you will be unable to meet this requirement, please contact our DME billing office at **1-800-984-5554 x 3590 or 920-730-3590** for further assistance.
7. Failure to pay in a timely manner will result in moving your account into the past due process, which starts the collection procedure and could impact any future order needs you may have.
8. Returns of unopened/unused merchandise can be accepted within 10 days of purchase and are subject to inspection by TCAH and reliant on condition of product at time of return. WI State Law does prohibit the return of any personal hygiene products (including all bath aids) or disposable supplies. We are unable to process returns for any custom fit products or items billed to insurance that may have been denied or applied to your deductible. Defective products will be replaced within the terms of the vendor (typically within 30 days of original purchase).
9. Credits will be administered depending on form of original payment. Credit cards will be refunded back to the card used. Cash or checks will be refunded by our ThedaCare corporate office via check and mailed to your address of choice within 2-3 weeks.

Please contact your insurance company if you have any questions regarding your policy benefits or feel that a claim has been wrongfully denied.

Please help us ensure correct billing and timely claims processing by informing us of any changes in: **Address, Phone, Insurance carrier, Policy and/or Group number.** You may inform our office of these changes by contacting our DME billing office at **1-800-984-5554 x 3590 or 920-730-3590.**

## COMMON INSURANCE TERMS

**ABN (Advance Beneficiary Notice):** The ABN is designed to inform individuals that the DME provider believes the supplies and/or products that have been requested may be denied by their insurance plan. Common reasons for an ABN include: not meeting the coverage criteria set by the insurance plan, requesting more supplies than are allowed, or having already received a similar item

**Allowed/Contracted amount:** The amount that your insurance plan considers payment in full for a particular approved medical service or supply.

**Co-Insurance/co-payment:** Refers to monies that an individual is required to pay for services, based off their specific insurance plan benefit. This is **in addition** to what the insurance pays in order to satisfy the full allowed amount.

**Deductible:** Your **annual deductible** is an amount you may need to pay each benefit year before your insurance company will pay for covered services

**DME Benefits:** Insurance plans may have a specific level of coverage for DME (Durable Medical) benefits. This typically applies to both Medical Equipment (i.e. walkers, wheelchairs, oxygen, etc) and Medical Supplies (i.e. wound dressings, diabetic supplies, urological/ostomy supplies, etc). Refer to your specific plan for details.

**EOB/Remittance Advice:** Statement prepared by the insurance company detailing the processing of the claim including whether paid or denied, contractual amount, co-pays, deductibles and patient responsibility.

**Exclusions:** Medical services that are not covered by an individual's insurance policy (even when prescribed by your medical provider)

- Common exclusions TCAH has noted through claims denial include (but are not limited to) Enteral/tube feeding services, Lift chairs, Self-help aids/bathroom aids, exercise equipment, compression stockings

**Quantity Limits:** Medicare and Medicaid have set limits for the number of supplies you can receive within a designated time period. **Many insurance companies now have specified quantity limits** or follow the Medicare allowed amounts.

**Maximum Dollar Limit:** The maximum amount of money that an insurance company will pay for claims within a specific time period (i.e. \$2500/year for DME). Maximum dollar amounts vary greatly and may be specified in terms of types of illnesses or types of services. They may be specified in different time frames such as lifetime or per year.

**Rent to the Purchase Price:** Some insurance plans, including Medicare, require renting equipment until the purchase price is reached. Other insurances may rent for a specified time period to ensure effectiveness/need and then allow a convert to sale claim. The **insurance coverage/plan** determines whether an item is rent to purchase price or if it can be a sold at the time of initial service.