



MedCents Bill Negotiation and Consumer Advocacy Service

Non-covered medical bills with your UnitedHealthcare FlexWork Limited Medical Minimum Essential Coverage (MEC) Plan? The MedCents Advocacy Program may be able to help. And, there's no additional cost to you!

What is balance billing?

Balance billing is the difference between the amount your network provider charges and the amount the plan will pay. Some reasons you may receive a balance bill include:

- You have exceeded the annual visit limit allowed by the plan (See Example 1).
- You owe more than your FlexWork benefit plan covers for an inpatient hospital stay (See Example 2).
- You receive care from an out-of-network provider (See Example 3).

How it works

Using MedCents Advocacy Program is simple:

- Step 1 - Log into the **flexwork.uhc.com** member portal or call the customer service number on the back of your ID card to access the MedCents Advocacy Program. A MedCents representative will explain the entire process and documents needed.
- Step 2 - Provide billing detail to MedCents.
- Step 3 - MedCents will contact the provider's office and request a reduction in your balance and negotiate different payment terms to help you better manage your medical bills.
- Step 4 - MedCents will contact you to advise if the provider is agreeable to provide a discount or improved payment terms.

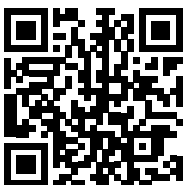
Here are a few situations where MedCents could potentially reduce medical bills.

	Example 1 Sally's first outpatient knee surgery was covered by the Plan. However, she needed a second surgery which was not covered. She now owes the full charged amount.	Example 2 Mary had a hospital stay which was covered by the Plan up to \$10,000. However, her balance exceeded her benefit. She now owes the non-covered charges.	Example 3a Ben owes \$0 because the service was in-network.	Example 3b Ben owes the full amount because the service was out-of-network and not covered by the health plan. ¹
Medical plan	FlexWork Enhanced Limited Medical Plan	FlexWork Enhanced Limited Medical Plan	FlexWork Standard Limited Medical Plan	FlexWork Standard Limited Medical Plan
Billed charges	\$1,500	\$45,000	\$2,000	\$2,000
Minus UnitedHealthcare network discount	\$0 (Non-covered service)	(\$18,000)	(\$1,400)	\$0 (Non-covered service)
Allowed amount after network discount	\$1,500	\$27,000	\$600	\$2,000
Minus member copayment	\$0 (Non-covered service)	(\$2,500)	(\$50)	\$0 (Non-covered service)
Balance before FlexWork insurance benefit	\$1,500	\$24,500	\$550	\$2,000
FlexWork insurance benefit	\$0 (Non-covered service)	(\$10,000)	(\$550)	\$0 (Non-covered service)
Total value of FlexWork network discounts and insurance benefits	\$0 (Non-covered service)	(\$28,000) (\$18k network discount + \$10k plan benefit)	(\$1,950) (\$1,400 network discount + \$550 plan benefit)	\$0 (Non-covered service)
Member balance after copay, network discounts, and insurance benefits² (amount subject to MedCents Bill Negotiation)	\$1,500	\$14,500	\$0 (Member only responsible for \$50 copay)	\$2,000
Illustrative MedCents negotiated discount³	(\$500) (33%)	(\$5,500) (38%)	n/a (no balance owed)	(\$500) (25%)
Final reduced balance member owes provider³	\$1,000	\$9,000	n/a (no balance owed)	\$1,500

¹ Use United Healthcare network providers when possible. If you receive services from an out-of-network provider, you may be balance billed, which may mean higher out-of-pocket costs for you.

² Copays and non-covered items remain the member's responsibility and will not be considered eligible in the MedCents negotiation.

³ For illustration only, actual amounts charged by providers vary.



To learn more, click link below.
uhc.care/MedCentsBrainshark