How Your Claim is Paid

Once you use your benefits, you might have questions about a claim or how a service was billed. This sheet has helpful information about how the claims process works.

Your claims

How your HRA claim is paid

As a UnitedHealthcare member, your out-of-pocket expenses will usually be lower when you use a network provider. Your health care provider may ask you to pay your out-of-pocket portion of the bill at the time of your office visit, or they may submit the claim to UnitedHealthcare first and send you a bill later. Many providers have access to secure online tools that help them quickly determine your share of the costs and use any available funds from your HRA account.

Once your claims are processed by UnitedHealthcare, your healthcare provider will bill for any amount you owe. You can view a detailed explanation of the bill and see the amount paid by UnitedHealthcare at myuhc.com.

If you visit a health care provider who is not part of the UnitedHealthcare network, he or she may require partial or full payment at the time of service. Also, some non-network health care providers do not have the ability to bill UnitedHealthcare directly, leaving you responsible to submit a medical claim form to UnitedHealthcare.

Standard claim process

1. **You present health plan ID card at doctor’s office.**
2. **Provider either asks you to pay your out-of-pocket portion up front or submits claim to UnitedHealthcare for cost of the visit.**
3. **The claim is processed according to your network benefits. A Provider Remittance Advice is sent to the provider.**
4. **The provider is paid from your plan by UnitedHealthcare.**
5. **UnitedHealthcare sends 2nd Provider Remittance Advice to provider showing any other payments that you may need to pay.**
6. **You will need to check your online health statement that shows your responsibility (if anything), claim information.**
7. **Provider bills you directly if you owe money.**

For illustration purposes only. Diagram illustrates network benefits.

Medical claim form

If you are eligible to receive care from a doctor who is a non-network provider, you may need to fill out a medical claim form. Our network health care providers normally take care of claim forms for you.
What your providers need to know about the UnitedHealthcare Health Plan with a Health Reimbursement Account

Your patient is a member of a UnitedHealthcare health plan with a Health Reimbursement Account (HRA). All services, other than network preventive care, are subject to an annual deductible and out-of-pocket maximum. Please review the following information about how to process claims for plan members.

You can verify your patient’s benefits in one of two ways:

Online at unitedhealthcareonline.com OR call 1-877-842-3210. Select the prompt for access to benefits and eligibility information.

- Please do not ask the patient for any payment at the time of service, unless you have the ability to process your claims online directly with UnitedHealthcare.

- Once you file a claim on behalf of your patient, UnitedHealthcare will pay the agreed to discounted rate directly to you.

- UnitedHealthcare will notify both you and the patient with an Explanation of Benefits describing the amount paid and the balance owed to you by the patient.

- Claims are paid first dollar from the member’s HRA. If the patient has a financial obligation, UnitedHealthcare will notify you through realtime adjudication or with a Remittance Advice (Explanation of Benefits) after your claim has been processed. You may then bill the patient directly for the balance. Although you may charge the patient less than the rate you negotiated with UnitedHealthcare, the total cost – paid by UnitedHealthcare and the patient – should never be higher than the total contracted rate.