

Getting Financial Clearance Before Your Non-urgent Procedure or Surgery

Financial Clearance

Allina Health cares about your health. This includes your financial well-being.

For some hospital services, Allina Health has a process to help you understand your insurance benefits *before* your non-urgent (routine) procedure or surgery*. This process is known as financial clearance.

In some cases, a price estimate may be given as well.

After your service is scheduled, members of the financial clearance team will confirm your insurance eligibility and research your plan benefits which could include:

- what your insurance covers
- the minimum amount you may owe (copays, coinsurance and deductibles)
- what network limitations you may have
- what referral requirements you may have.

The goal of this process is to help tell you about your insurance eligibility and benefits before you receive care and to prevent surprise medical bills after your service.

It is important to note that any benefits shared are not a guarantee of payment.

Step 1: Scheduling

A scheduler will set your service date at least 7 business days from today.

Step 2: Pre-registration and Prior Authorization

A member of the pre-registration team will call you to:

- verify your information
- verify your insurance and review your benefits
- give you a price estimate for your service (if available)
- give you check-in directions for your visit (if needed).

It is important to answer calls or return voice mails from Allina Health to keep your service from being delayed or canceled.

Your insurance may require information about the medical necessity of your service before approving it. This is known as prior authorization.

Allina Health will work with your health care and insurance providers to get that approval if it is needed.

*Your procedure or surgery will be known as a service.

Step 3: Financial Clearance Delay

Allina Health will do its best to get financial clearance before your service.

If financial clearance can't be secured before your service date, the following will happen.

- Allina Health will contact your health care provider to make sure your service is not urgent.
- If your service is not urgent, your provider or scheduler will contact you before your scheduled date.
 - You may reschedule or cancel the service.
 - You may have the service as scheduled. If you choose to have it:
 - You may be responsible for paying the full cost.
 - You will be asked to sign a waiver saying you agree to pay the full cost.
 - A financial counselor may meet with you to talk about your payment options.

What Should You Do?

Call your insurance provider to be sure you know what your plan covers. Your insurance provider is the best source for this information.

Call your insurance provider before your service and ask:

- what your plan covers
- if you need a referral and how to get one if you need it
- if your service is in-network or out-of-network
- how much your plan will pay.

The phone number for your insurance provider should be on your insurance card.

Questions and Concerns

Call your health care provider if you have questions or concerns about:

- your procedure or surgery
- the financial clearance process
- financial counseling.

About Estimated Costs

When possible, Allina Health does its best to give you an accurate estimate for your service.

There may be added care you need at the time of the service that could not be planned. This can lead to extra costs.

About Financial Counseling

You can meet with a financial counselor to talk about your options if you:

- don't have insurance
- are underinsured
- are concerned about how to pay for your service.