



## Frequently Asked Questions by Members

### **Premium Billing**

Please take a moment to review the following guidelines for how Pivot Health plans are billed. If you have any questions about billing or need to make a change to your billing method, please contact Insurance Benefit Administrators (IBA), the billing administrator, at 844-630-7500, ext. 2.

#### *How do I make a payment each month to keep my insurance current?*

The credit card or bank account you provided at the time of enrollment will be automatically charged each month for your health insurance policy/policies. If you wish to change your credit card or bank account on file at any time, please call IBA, the billing administrator at 844-630-7500, ext. 2.

#### *Will I get a receipt of purchase?*

The welcome letter that is emailed to you immediately after enrolling in a Pivot Health plan includes your plan type and your monthly premium amount. This is your receipt of purchase.

#### *Will I receive a year-end statement of premiums paid?*

IBA, the billing administrator, does not mail year-end statements of premium paid. If you would like copies of receipts, please call 844-630-7500, ext. 2.

#### *How do I get copies of my statements?*

Premium statements and claims Explanation of Benefits are available on the [IBA self service portal](#). If additional information or assistance with enrolling in the portal is needed, please call IBA for assistance at 844.630.7500, ext. 2.

#### *Can I prepay for my insurance all at once?*

Prepayment is only allowed on plans that are a maximum of 180 days (90 days in some states). Otherwise, you must pay for your insurance premium on a monthly basis.

#### *Why was my credit card or bank account charged twice in one month?*

If you purchase four 90-day plans, your next 90-day coverage period will start a new premium billing cycle. The effective date of your new coverage could place you in a new billing cycle where your credit card or bank account will be charged twice in the same month.

#### *When will my credit card or bank account be charged during the month?*

The first payment is taken at the time of sale and applied to the first monthly premium statement and charged immediately for the first 30 days of coverage. Your second monthly premium

statement will be charged on or around the 10th of the month if your coverage effective date is between the 1st and 19th of the month. For coverages effective between the 20th and 30th/31st your credit card or bank account will be charged on or around the 22nd. All premiums are drafted on normal business days.

## **Doctor Network**

### **NO PPO REQUIREMENTS - Front of ID card**

*My doctor says they don't accept Pivot Health insurance because you are not in-network.* Most Pivot Health plans do not have PPO network requirements - you can see any doctor or medical facility you wish. When you visit your doctor or medical facility, show them the information on the front of your ID card that states how reimbursement is paid to the provider: **Physician services reimbursement: up to 125% of Medicare allowable.** **Medical facilities reimbursement: up to 150% of Medicare allowable.** If your provider has questions they can call the Benefits Verification number on the back of your ID card.

All bills submitted by your providers are repriced based on a Medicare allowable scale. This reimbursement to your provider is then increased by the percentage above Medicare allowable depending on the provider.

This information should give your doctor comfort that they are paid on a traditional scale above the Medicare amount.

*This information applies to short term medical plans underwritten by Companion Life Insurance Company only.*