

## MEDFORD

Complete Integrative Care  
3156 State St., Medford, OR 97504  
(541) 773-9772  
(541) 773-1113



## EAGLE POINT

Complete Care Health Centers  
1296 South Shasta Ave. Eagle Point, OR 97524  
3132 State St., Medford, OR 97504  
(541) 830-4325  
(541) 826-2620

|                         |   |
|-------------------------|---|
| <b>Procedure Title:</b> | <b>Procedure out of network insurance plans</b> |
| <b>Date:</b>            | <b>11/05/2025</b>                               |
| <b>Version:</b>         |   |
| <b>Department:</b>      | <b>CIC/CCHC</b>                                 |
| <b>Approved By:</b>     |   |

**Purpose:** Our goal is to see as many patients as possible while continuing to provide the highest quality of care but also create a plan where workflow and process can be beneficial for both the clinic and the patient. We want to create success from a reimbursement and collection standpoint but make policies and procedures consistent for all out of network plans.

### **Definitions:**

#### Out of network:

- Our clinic does not have a current credentialing contract with the insurance carrier.

#### Major **IN NETWORK** Carriers:

- BCBS
- MODA (CIC is a Non PCP360 provider)
- PacificSource
- Medicare
- Medicaid (CCHC does NOT accept Medicaid as Primary)
  - If we discover a patient has been scheduled with CCHC and has only Medicaid, we must contact the patient to inform them and cancel all future appointments.
  - Please alert the team of the cancellation in the EP group chat so we can get the spot filled with a patient on the waitlist.
- First Choice Health
- Atrio
- Aetna (As of 02/01/25 CCHC is out of network)
- Cigna (As of 02/01/25 CCHC is out of network)
- United Healthcare
- Providence (except for Physical Therapy)
  - Excludes Providence Choice & Providence Choice PEBB (CIC only) (CCHC Chiro providers are in network)
- Provider Networks of America (HMA, i.e., Amy's Kitchen)
- HealthNet Commercial PPO (As of 02/01/25 CCHC is out of network)
- HealthNet Medicare Advantage (As of 02/01/25 CCHC is out of network)
  - Wellcare (As of 02/01/25 CCHC is out of network)

#### Out of network/Self-funded/Healthshare plans:

- Kaiser Permanente
- Providence Choice Health Plan (CIC only)

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- Providence Choice/Providence Choice PEBB (CIC only) (CCHC Chiro providers are in network)
- A&I Benefit Plan administrators (unless Providence Preferred is listed as network on card)
- Allied Benefit Systems (unless listed as Aetna network on card)
- Hometown Health
- FamilyCare Health Plans
- American Insurance Admin
- Umpqua Health Alliance
- Yamhill Community Care Organization
- Global Care
- Liberty Healthshare/Medicost
- Mega Life & Health
- Select Health of UT
- MagnaCare
- Key Benefit Administrators
- American Healthshare Alliance
- Arizona Complete Health
- Partnership HealthPlan
- Planned Administrators
- Brown & Toland Medical Group
- BAS Benefits (6 Degrees Health) (CIC only)
- PHCS (CIC Only)
- Multiplan (CIC only)
- First Health (CCHC only)
- Tricare (CCHC only)
- Humana Medicare Advantage (Will still courtesy bill. However, patients should be aware their out of pocket may be higher)

\*\*Please note, these are examples of plans we've come across. It is possible there are others not listed. When in doubt, please reach out to billing to verify\*\*

\*\*\*Additionally, please note it is the sole responsibility of the patient to determine our in or out of network level. We strive to provide as much information as possible, but cannot guarantee benefits\*\*\*

### Procedure:

If a patient arrives at check-in or phones to schedule an appointment with an insurance that is **NOT** one of the major carrier's staff should reach out to billing to verify the insurance.

If it has been confirmed we are out of network with the patient's insurance carrier and patient still wishes to be seen, proceed with the following steps.

1. At check-in or over the phone registration enter the patient insurance as "self-pay."

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2. Collect any necessary TOS fees at time of appointment
3. Have patient sign self-pay policy form.
4. Inform the patient that after all charges have been posted by our billing team, they can request a copy of the superbill to submit to their insurance themselves. The insurance will then process and reimburse patient directly.