

**COORDINATION OF BENEFITS POLICY: Consumers who have private insurance**  
(Version: 1-14-05)

1. Western Highlands Network (WHN) providers are responsible for coordination of benefits.
2. State IPRS funds are only to be used as a last resort when funding from all other sources has been found to be insufficient.
3. Providers should request authorization for services from WHN only if that that service has been deemed medically necessary via a service order. WHN will not authorize State reimbursement for a service if the consumer's insurance company or Medicaid has determined that the service is not medically necessary.
4. Providers will not be permitted to collect more than the state reimbursement rate for a particular service if any state funds are involved.
5. Providers are required to assess and attempt to collect the standard sliding scale fee as set by WHN where applicable.
6. Providers who choose to directly screen a consumer (rather than going through the Access Unit) will perform the tasks of the Access Unit as described below.
7. All consumers who have private insurance will be encouraged to pursue services via their insurance company's provider network. Consumers will be advised that they may re-contact the Access Unit if satisfactory arrangements cannot be made via their insurance company. Access will screen and refer the consumer to the provider they choose in the WHN network.
  - A provider who has an office within a 30 mile or 30 minute radius of the consumer's residence will be considered available.
  - If no provider in the insurance company's network is available, or is not available within a reasonable amount of time, the company may be able to directly contract with a local "out of network" provider, and the consumer should be encouraged to request that the insurance company do so.
  - If a consumer has an urgent or emergency situation, it may be necessary for Access to arrange for stabilization first, and then coordinate a referral via the insurance company.
8. If a consumer with private insurance contacts a provider who is not on the consumer's insurance provider panel, the provider should encourage the consumer to pursue services via his/her insurance company's provider network. The consumer may be instructed to contact Access if satisfactory arrangements (such as developing an "out of network" contract) cannot be made via their insurance company. Access will screen and refer the consumer to the provider they choose in the WHN network.
  - If a consumer has an urgent or emergency situation, the provider should first take the necessary steps to assure that the emergency is stabilized, before a referral is made via the insurance company.

9. Consumers who choose not to receive services from an available provider who is reimbursable by his/her private insurance company (because of a high deductible or some other reason) will be screened by Access and referred to the provider they choose. The provider will not be reimbursed by state IPRS funding, and the consumer will be charged the provider's usual fee.
10. Consumers who have exhausted their private insurance benefits will be screened by Access and referred to the WHN provider they choose. The provider will be reimbursed by state IPRS funding, if the consumer is eligible, and the consumer will pay the sliding scale fee. The provider may be asked to provide documentation from the consumer that their benefit has been exhausted.
11. Some consumers with private insurance may need a service that is not covered by their policy, or their policy may only cover part of the cost of the service. Access will screen and refer these consumers, if they meet eligibility requirements, as appropriate:
  - The provider will bill insurance first, assess the sliding scale fee second, and bill IPRS for the remainder.
  - The provider may be asked to provide documentation from the consumer that their benefit does not cover the service, and that the sliding scale fee has been assessed.
12. If a physician employed by a WHN provider agency is on an insurance company's provider panel, and the consumer wishes to receive services from that physician, Access will screen and refer the consumer in the usual manner.