

Frequently Asked Questions for Prospective Members

Provider Network

- ▶ **What is a primary care provider?**
A primary care provider (PCP) is a doctor or nurse practitioner who manages your health care, ensuring you receive medical care in an effective and efficient manner. Your PCP will coordinate your medical care through the use of in-network specialty practitioners.
- ▶ **Who are my in-network providers?**
In-network providers (doctors, nurse practitioners, clinics, hospitals, pharmacies and behavioral health professionals) are listed in Find a Doctor at [QuartzBenefits.com/findadoctor](https://www.QuartzBenefits.com/findadoctor).
- ▶ **How do I know if the doctor I'm currently seeing is a Quartz in-network provider?**
You can search to see if your doctor is an in-network provider by going to [QuartzBenefits.com/findadoctor](https://www.QuartzBenefits.com/findadoctor). The online provider listing shows the practitioners and facilities that are in-network for you.
- ▶ **How can I find out which hospitals or emergency rooms are in-network for me?**
To learn more about which hospitals and emergency rooms are in-network, visit [QuartzBenefits.com/findadoctor](https://www.QuartzBenefits.com/findadoctor). Here you can search by your plan to learn which providers you can see.

Accessing Care

- ▶ **Do I need to see my PCP for all my health care?**
You should talk with your PCP before seeing other types of practitioners so he / she may coordinate your health care.
- ▶ **How should I schedule an initial appointment with my new PCP? Do I need to schedule a physical with my new PCP?**
If you have ongoing health care needs or a current reason to see your PCP, please call your PCP's office as soon as possible to schedule an appointment. If you do not have any current or ongoing health care needs, we recommend that you schedule a new patient visit with your PCP. New patient visits are routine and often scheduled several weeks in advance.

- ▶ **If I have been receiving care from a specialist, how do I transition my specialty care to an in-network specialist?**
You will need to complete a health care transition form. You can find it at [QuartzBenefits.com/memberforms](https://www.QuartzBenefits.com/memberforms). Quartz's medical management team will review your information, and will work with you to transition your care. **Please note:** Your deductibles, coinsurance, and copayments will still apply and you may be responsible for amounts in excess of usual, customary and reasonable, which is known as Balance Billing. Balance Billing does not apply to your plan's out of pocket limit.

Enrollment Information

- ▶ **Why do I need to select a PCP?**
A PCP is a physician or nurse practitioner who works with you to manage your health care. Your PCP ensures you receive continuous, quality care in an efficient, cost-effective manner. He / she will coordinate your medical care through Quartz's network of specialty practitioners. To help you reach an optimal level of health, it is beneficial for you to have a PCP oversee all of your care.
- ▶ **Do I need to choose a PCP at UW Health, UnityPoint Health - Meriter, Gundersen Health System or SwedishAmerican, or are there other PCPs I can select?**
Quartz offers a variety of PCP options. Visit [QuartzBenefits.com/findadoctor](https://www.QuartzBenefits.com/findadoctor) to search for all the available PCPs based on your health plan.
- ▶ **If I am seeing a PCP who is not accepting new patients, can I select him / her when I enroll with Quartz?**
Yes. If you are currently seeing a PCP who is listed as only accepting current patients with Quartz, you can list that physician and continue seeing him / her.
- ▶ **When will I receive my new member materials including my identification cards?**
You will receive your new member materials, including your ID cards, 7 to 10 days before your coverage begins.

Health Plan Information / Benefits

▶ What is the Health Maintenance Organization (HMO) plan?

To be covered under your HMO plan benefits, you must obtain care from an in-network PCP, specialty clinic, hospital or other health care facility in your network.

▶ What is the Point-of-Service (POS) plan?

All POS members must select or be assigned a PCP when they enroll. Utilizing your PCP ensures you have coordinated care for all your health care needs. A Quartz POS plan pays benefits at two different levels based on whether you follow the In-Plan Benefit Level or the Out-of-Plan Benefit Level.

The In-Plan Benefit Level applies to care and services you receive from –

- Your selected PCP from your plan's network
- Specialists participating in your plan's network

The Out-of-Plan Benefit applies to care and services you receive from –

- A practitioner / provider who is not listed in the network.

As a reminder, you must notify Quartz of any inpatient services you receive from an out-of-plan provider.

▶ What is the Preferred Provider Organization (PPO) plan?

A Quartz PPO plan provides coverage through HealthEOS and PHCS to serve as the provider network. HealthEOS includes providers throughout Wisconsin. PHCS (MultiPlan) includes providers throughout the United States.

A Quartz PPO plan pays benefits at two different levels based on whether you receive care from In-Network or Out-of-Network providers.

The In-Network Benefit Level applies to services you receive from providers in the HealthEOS network or the PHCS (MultiPlan) network. The In-Network Benefit Level provides the highest level of coverage.

The Out-of-Network Benefit Level applies to services received from providers located outside the HealthEOS network and outside the PHCS (MultiPlan) network. The Out-of-Network Benefit Level requires you to pay a larger portion of the health care costs.

As a reminder, you must notify Quartz of any inpatient services you receive from an out-of-plan provider.

▶ What preventive care coverage do I have?

Preventive care services include regular screenings, immunizations and other tests, and are covered by your plan without a copayment, coinsurance or deductible when received by a provider within your plan's network. However, if a new or existing health problem is discussed during a preventive health care visit, a separate office visit will be billed as required by national coding and billing guidelines. This means that you may be subject to out-of-pocket charges (copay, coinsurance or deductible) for these additional services. Visit QuartzBenefits.com/ preventive for a list of specific preventive services covered under the Affordable Care Act.

▶ What are the charges I can expect if I use an emergency room or an urgent care facility?

You can usually expect to receive anywhere from one to three (but sometimes more) claims per visit depending on the services provided during your visit. The charges you can expect include but are not limited to –

- The room / facility charge which is subject to the emergency room or urgent care benefit,
- A charge for the practitioner who saw you which is subject to the physician services benefit, and
- The lab or X-ray bill(s), if applicable, which is subject to the diagnostic services benefit.

▶ What is a copayment?

A copayment is the dollar amount you are responsible for paying the provider for a service. Based on the service, you pay only the dollar amount shown on your plan's Schedule of Benefits or Summary of Benefits and Coverage. To view your Schedule of Benefits or Summary of Benefits and Coverage, log in to MyChart at QuartzMyChart.com.

▶ What is coinsurance?

Coinsurance is the term used to identify the percentage of health care costs you are responsible for paying the provider. You pay the percentage listed on your Schedule of Benefits or Summary of Benefits and Coverage.

▶ What is a deductible?

A deductible is the amount you are required to pay for certain covered medical services before Quartz will make a payment. Your deductible is listed on your Schedule of Benefits or Summary of Benefits and Coverage. Once the deductible is met, you pay a copayment or coinsurance for the cost of the covered medical services depending on your Quartz plan. See your Schedule of Benefits or Summary of Benefits and Coverage for specific details.

▶ How does a deductible plan work?*

Before Quartz will make a payment toward any services you receive, you must first pay the deductible found on your Schedule of Benefits or Summary of Benefits and Coverage. After the deductible is met, you pay a copayment or coinsurance for the cost of the covered medical services until you have met the annual out-of-pocket limit.

** For aggregate HSA-qualified plan designs, if you have family coverage, the family deductible must be satisfied before Quartz will make a payment for covered services.*

▶ What charges are applied to the deductible?*

Please refer to your plan's Schedule of Benefits or Summary of Benefits and Coverage for a list of services.

** For aggregate HSA-qualified plan designs, if you have family coverage, the family deductible must be satisfied before Quartz will make a payment for covered services.*

▶ **What is Balance Billing?**

If you receive care from an out-of-network doctor, you may have to pay additional charges. These charges, known as Balance Billing do not apply to your plan's maximum out-of-pocket costs.

When a doctor participates in Quartz's network, he or she agrees to charge a specific rate for services. This rate is the amount that Quartz will pay them to care for you (known as the allowed amount). If you receive care from an out-of-network doctor, they may charge more than Quartz's allowed amount. Quartz will compare charges from other doctors in the area for the same medical service. This comparison helps determine an amount that is usual, customary and reasonable (UCR) for that particular area. Quartz will pay the amount that is identified as UCR. If there is a difference between what the doctor bills and what Quartz pays, your doctor may bill you for the difference. This is known as Balance Billing and these charges don't apply to your plan's maximum out-of-pocket costs.

▶ **Can I change my PCP after I select one? How?**

You can change your PCP at any time. To select a new PCP, log into MyChart at QuartzMyChart.com or call (800) 362-3310. PCP changes are effective on the day of Quartz's receipt of your request unless you request a future date.

▶ **Who files claims when I receive health care services?**

When you receive care from in-network practitioners, the practitioner will submit the claim for you. If you receive a bill from an in-network practitioner that has not been submitted to insurance for claims processing, please send a message to Quartz Customer Service through MyChart at QuartzMyChart.com or call (800) 362-3310.

Prescription Medications / Pharmacy Benefit

▶ **What is medication prior authorization?**

Some medications require approval prior to coverage through Quartz. To obtain prior authorization you, your nurse, or your doctor needs to submit a Medication Prior Authorization Request Form indicating the reason you need a specific medication. The form is available at QuartzBenefits.com/priorauth. Each request is reviewed by Quartz's Pharmacy Program and evaluated against criteria selected by Quartz's Pharmacy and Therapeutics Committee. If prior authorization is denied, it does not mean you cannot take the medication, it just means that you will have to pay for it in full.

▶ **What if my medication requires prior authorization?**

If your medication requires a prior authorization, you should call your doctor to talk about changing to a different medication or submitting a Medication Prior Authorization Request Form.

▶ **What if I have difficulty starting the prior authorization process?**

Call Pharmacy Services at (800) 788-2949. We will work with you or your pharmacy to optionally request a New Member Drug Supply. This must be done within 90 days of becoming a Quartz member.

▶ **What if the medication I am currently taking will have a higher copayment?**

If your medication is listed at a higher copayment, you can talk with your doctor about formulary options that may be available.

▶ **What types of medications are not covered by my prescription drug benefit?**

Quartz prescription drug formularies list the medications that are part of the Quartz prescription drug benefit. There are some medications that are excluded from this list. These medications are not usually covered even if a prior authorization request is submitted. These may include –

- Over-the-counter medications, which are available without a prescription
- Medications used for cosmetic purposes
- Medications used to promote fertility
- Medications used to enhance sexual function
- Medications used to promote hair growth
- Medications used exclusively to lose weight
- Nutritional supplements, herbal medications and medical foods

▶ **Will Quartz cover the medication that I am currently taking?**

To see if the medication you are taking is covered as part of your pharmacy benefit, check the Quartz prescription drug formulary at QuartzBenefits.com/formulary.

▶ **Can I use my current pharmacy?**

Quartz has a large pharmacy network. To see if your pharmacy is in-network go to QuartzBenefits.com/findapharmacy.

▶ **Do I need my PCP to write new prescriptions for my medications?**

Check to see if your medications are listed on the Quartz prescription drug formulary by going to QuartzBenefits.com/formulary. If they are not, you will want to talk with your PCP about formulary options that may be available.

MyChart

▶ **Is the Quartz MyChart the same as UW Health's MyChart?**

If you are becoming a Quartz member and have signed up for MyChart through UW Health, you do not need to sign up again through Quartz. As a Quartz member and UW Health patient, you can enjoy the benefits of having your Quartz health plan information and portions of your UW Health medical information all in one account.

▶ **What if I have a MyChart or MyCare account through another health system?**

With MyChartCentral you can access all of your MyChart / MyCare accounts, including those from Gundersen Health System, UnityPoint Health - Meriter, Madison-area health care organizations and other organizations nationwide. Use MyChartCentral to access all those accounts from one place using a single username and password.

▶ **If I had MyChart through another health plan, do I need to sign up again?**

Yes. In order to see your Quartz health plan information, you will need to sign up for MyChart by going to QuartzMyChart.com.

Important Contact Information

▶ **If you have questions about –**

- Benefits through your Quartz health plan – send a message to Quartz Customer Service through MyChart at QuartzMyChart.com, or call **(800) 362-3310**.
- Quartz in-network providers – visit QuartzBenefits.com/findadoctor or send a message to Quartz Customer Service through MyChart at QuartzMyChart.com, or call **(800) 362-3310**.
- Prescription Drug Benefits – send a message to Quartz Customer Service through MyChart at QuartzMyChart.com, or call **(800) 362-3310**.
- Behavioral Health Services – Contact Behavioral Health Care Management at **(608) 640-4450** or toll-free at **(800) 683-2300**.
- UW Health's physician availability and clinic locations – call the UW Health Welcome Center at **(608) 821-4819**.
- UnityPoint Health - Meriter's physician availability and clinic locations - call the Dr4U Physician Referral Service at **(608) 417-3748**.
- Gundersen Health System's physician availability and clinic locations - call the Gundersen Registration and Establishing Care team at **(608) 775-0601**.
- SwedishAmerican's physician availability and clinic locations - call HealthConnect at **(779) 696-7081**.