



The Insurance Insider



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Did You Know
We Offer All
These Services?

- Group Health
- Group Life
- Group Dental/Vision
- Group Disability
- Life Insurance
- Short Term Disability
- Long Term Disability
- Long Term Care
- 401K Retirement Plans
- Voluntary Benefits
- NYS Mandatory DBL

Insurance Companies Like to Keep Secrets.



Insurance companies like to keep secrets and they love to save money. Each year thousands and thousands of health claims are denied by insurance carriers even though many people follow the insurance company rules.

Carol Mateja works at our company and she is affectionately known as our "Claims Queen." Carol loves 'going to bat' for our clients to help them get their claim issues resolved. She is very, very good at it.

Carol has retrieved over \$10,000 in un-reimbursed claims for our clients so far this year. This is money that our clients thought they would never see again, but Carol managed to get it back due to her persistence and knowing how to do it.

This month, Carol is going to share some tips that can help you get your money back if an insurance carrier denies your claim or won't pay for a medical procedure.

Letters are your best bet.

Yes, it might seem old-fashioned but a letter to the insurance carrier is by far the best way to communicate. Don't do anything over the phone. It usually will take forever to get through and when you're done there will be no record of it.

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So the insurance carrier can say that it never happened

"Letters almost always get a response, Carol says. "Some carriers will answer your email, but many won't. So write a letter outlining your complaint and asking for a specific resolution."

Carol also recommends that you send copies of your complaint to your state insurance commissioner. "Keep copies of everything. That way, if your insurer says, We never said we'd cover that, you can say, I have it right here in writing."

Don't pay if you don't have a say.

When you must see an out-of-network doctor, your health plan usually makes it clear that it'll cost you. But when you have surgery, the hospital chooses the anesthesiologist. If you get that annoying 'out-of-network' bill, Carol says, "draft a strongly worded letter stating you had no say about the anesthesiologist—in-network or otherwise—and, therefore, won't pay any additional fees. If you don't have direct control, you are not liable. This strategy is likely to work every time, but few people know about it."

MORE →

Insurance Company Secrets, Continued

To get tested, talk up your symptoms.

Your insurer doesn't want to pay for a colonoscopy if it's not necessary. But if your best friend is diagnosed with colon cancer and you want the \$675 test to put your mind at ease, here's how to get one covered: Mention to your doctor that you've had some blood in your stool and you've had a lot of gas lately—or simply that your bowel habits have changed. Your health provider has to pay for the test if your doctor requires it because you have gastro complaints.

Doctors can be good weapons.

You just got four massage sessions, under doctor's orders, for lower-back pain—but your insurer refuses to pay for them? Ask your doctor for help. He can tell the insurer he is going to file a complaint to the state board that regulates insurance companies.

"Insurance companies may not fear you, Carol says, but they do respect the state board of insurance regulators. Doctors can intervene on a patient's behalf by pressuring the board and help the patient win coverage."

There are ways to get drugs cheaper.

Doctors are sometimes wowed by the latest and greatest drugs, which tend to be the most expensive. Make sure these newer, high-end meds are what you need before you leave the doctor's office. Sometimes your insurance plan won't pay for them at all; other times it'll charge higher co-pays. In many cases, drugs have generic versions that are just as effective but cheaper than the newer ones. Always ask

your doctor (or the pharmacist) for generics. And if you really need a medicine that doesn't have a generic version, order it by mail. Many plans have a less-expensive mail-order pharmacy option. Another prescription trick for people who have chronic conditions like allergies: Ask your doctor to write you a prescription for two or three months' worth of medication instead of one.

If all else fails, hire a Health Advocate.

There are Advocates that specialize in fighting with the insurance companies that refuse to pay claims on behalf of the patient. They usually charge a fee to represent you but if the claim is significant it will be well worth the money to have someone 'in your corner.' Carol puts it this way, "the insurers know that advocates know the laws, the regulations—all things a regular consumer might not know and that makes the insurers very nervous."

Of course, if you are a client of Healthplansny.com, you can call Carol directly to help get your claim issues resolved. We can't guarantee that we can resolve all claim issues but Carol says, "if it's a legitimate claim that the insurance company won't pay, I'm all over it."

There is no charge for this service and we're happy to help you. You can reach Carol directly at: 914-277-2227.



September is Life Insurance Awareness Month

Life Insurance Reality Check: Do you have enough? Do you have any?

About 70 million Americans do not have life insurance as reported by Life Insurance and Market Research Association (LIMRA)

Most people who do own life insurance, are underinsured. In fact the average policy is about \$176,000.

How much life insurance do you own? Call us today for a free instant term life quote and see how affordable term life insurance can be.

Call Today!

914-633-1717

Term Life Quotes from over 100 companies in less than 5 minutes!

Voluntary Benefits, Give Your Employees a “Perk” That Won’t Cost You a Dime!

Just about every employee wants more perks. Maybe it’s more vacation time, paid time off or even a company car. But these perks can be costly to the employer. With the state of our current economy, most employers are looking for ways to cut costs and sometimes it means reducing benefits. But reducing benefits can hurt your employee’s moral and even make employees consider finding a new job with a company that offers a better benefit package.

Voluntary benefits could be the answer.

Voluntary benefits such as:

- life insurance
- disability insurance
- accident insurance
- cancer insurance

As most insurance sales are flat or down this year compared to previous years, voluntary benefit sales are up over 4%. Employers are beginning to realize the importance of offering supplemental benefits to their employees.

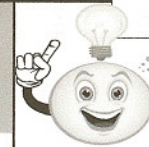
Employees can choose from a menu of benefits that are offered and pay for them directly through a payroll deductions. In addition, because these benefits are considered part of a group

plan, the cost is significantly less for the employee than if he or she purchase them on their own.

Voluntary Benefits can provide your employees with benefits they really want and really need. And what’s even better is that they won’t cost you, as an employer, a dime.

We represent some of the top carriers in the industry such as **Mutual of Omaha** and **Colonial Life** just to name a few. If you are interested in looking into offering Voluntary Benefits at your company, just give us a call at 914-633-1717 or send back the coupon on the last page of this newsletter.

This is a “perk” your employees will appreciate at no cost to you.



Insider Tip!

A prescription drug card can add at least \$75—\$150.00 per employee, per month to your insurance premiums.

A Prescription Drug Savings Program can save your company almost 50% on prescription use.

The Program Covers:

- Brand and Generic Drugs
- No Deductibles
- No Pre-existing Conditions
- No Annual Maximums
- And Much, Much More!

Call us today for more info on our Prescription Savings Program and start saving money!

Did You Know?

90% of employers offer health insurance to employees

15% Offer health benefits to part-time employees

40% Offer health benefits to seasonal employees