



Colorado Consumer Health Initiative

OUT-OF-NETWORK BILLING PROTECTIONS: WHAT YOU NEED TO KNOW EFFECTIVE JAN 1, 2020

In 2019, Colorado passed a law that protects Colorado consumers with state-regulated health insurance plans from being balance-billed for unknowingly receiving care outside of their insurance network.

QUESTIONS ABOUT YOUR BILL?

Please call
University of
Colorado
Medicine at
303-493-7700.

Thank you!



WHAT IS A “SURPRISE OUT-OF-NETWORK MEDICAL BILL”?

Patients may receive surprise out-of-network medical bills when they unknowingly see someone outside of their insurance network. Patients are often billed for the difference between what the insurer covered and the total bill, which is known as a “surprise” bill.



WHEN DOES THIS LAW APPLY?

This law protects people on state-regulated insurance plans (check for “CO-DOI” on your insurance card) from receiving surprise bills:

- When you receive emergency care from facilities or providers that are out-of-network, including some ambulances
- When you receive non-emergency care at an in-network facility and unknowingly see an out-of-network provider

Consumers who knowingly seek care from an out of network provider or facility are responsible for all costs.



THIS LAW APPLIES TO ME. HOW WILL THIS IMPACT ME?

You are still responsible for any out-of-pocket costs required by your insurance plan. The rate you pay is based on your set in-network rate for that care, you can find out what this amount is before any procedure by calling your insurance company to ensure that you aren't overcharged. Hospitals and some other providers are required to give you a written disclosure notifying you that you have the right to ask to see an in-network provider and to be notified ahead of time, if possible, if you are receiving out-of-network care. They may ask you to sign this disclosure.