

IN-NETWORK

VS.

OUT-OF-NETWORK

It's important to know which questions to ask when selecting a healthcare provider. For example, some medical providers may accept your insurance, but they aren't in-network, resulting in a steeper prices and surprise bills in the mail. Let's take a look at what this means for you.

IN-NETWORK

In-network refers to health care providers who are contracted with your insurance carrier.

These providers have generally agreed to accept the discounted amount as negotiated by your insurance carrier.

You end up paying less money out of your pocket when you receive medical services or supplies from an in-network provider.



OUT-OF-NETWORK

Out-of-network refers to healthcare providers who are not under contract with your insurance provider to offer healthcare at negotiated prices.

These providers will still accept your insurance, but the level of coverage for services is usually lower than services rendered in-network.

When you receive medical services or supplies from an out-of-network provider, you may be billed a non-discounted amount for any amount your insurance plan does not cover.

TIP

Avoid asking providers if they take your insurance. Instead, ask specifically if they are contracted as a participating provider with your insurance carrier. The best way to verify this information is by calling the customer service telephone number on the back of your insurance card or via your insurance carrier's website.