

Self-pay and seeking reimbursement on your own*



01.

Understand your insurance benefits and obtain prior authorization or predetermination of benefits – this helps determine if your plan provides coverage for a specific product or service and if it will be covered in-network or out-of-network

- Call the member services number on the back of your insurance card to ask if:
 1. The item is covered under your policy by providing them with the relevant **HCPCS code**
 2. Your insurance plan covers **durable medical equipment (DME)** or includes hearing benefits – if neither are part of your plan ask if it can be covered under major medical benefits
 3. Your insurance plan will cover as **in-network or out-of-network**
 - a. In-network means a doctor, hospital or medical provider accepts your insurance plan and is considered a preferred provider, having negotiated a contracted rate with your insurance provider
 - If Cochlear is in network with your plan, we suggest you use Cochlear's Reimbursement and Insurance Services rather than self-paying and seeking reimbursement on your own
 - b. Out-of-network would mean there is not a contract in place with your insurance provider and may result in higher costs
 - It may be helpful to ask upfront what they will charge for a product or service
 - An in-network exception may be granted since Cochlear is the sole provider for our products and services
- It may also be beneficial to ask them upfront how they need you to submit the claim and start to get familiar with the process



02.

Shop and place an order

- Pay out-of-pocket upfront before seeking reimbursement
- Ways to pay may include credit card, **HSA, FSA and CareCredit®**



03.

Cochlear will obtain a letter of medical necessity to serve as a prescription to provide you with medically necessary products.



04.

Cochlear will request a self-pay waiver for all replacement sound processor orders to be signed by you and is required for shipment



05.

Your order ships – parts and accessories orders usually arrive within 8 weeks; new sound processor orders may take longer



06.

After your order ships, follow the guidelines from your insurance plan for reimbursement and start preparation for the process to seek reimbursement on your own. Collect documentation such as receipts, letters and forms from your clinician as well as obtain a copy of your insurance provider's claim form.



07.

Complete the claim form and make a copy of it along with all your documentation



08.

Mail, fax, or email your form and documentation to your insurance company, retaining a copy for your own records

If your insurance denies coverage, you will follow the appeals process that your **insurance provider outlines**



09.

Wait to hear back from your insurance provider



10.

Follow up with member services at your insurance provider if needed

*Please keep in mind that if you choose to self-pay for an item generally covered by insurance, you may not be able to submit a claim on your own if Cochlear is contracted with your private insurance provider. Check our Insurance Plans page to see if Cochlear is contracted with your insurance provider. If Cochlear is contracted with your insurance provider, we suggest placing your order through Cochlear's Reimbursement and Insurance Services. If you seek reimbursement on your own you will be solely responsible for any amounts to include contractual or discounted payments that your insurance provider does not cover.

Please seek advice from your health professional about treatments for hearing loss. Outcomes may vary, and your health professional will advise you about the factors which could affect your outcome. Always read the instructions for use. Not all products are available in all countries. Please contact your local Cochlear representative for product information.

This communication is not intended for individuals who wish to seek insurance coverage from Medicare, Medicaid, VA, Kaiser or Tricare.

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