

## NAVIGATING INSURANCE



If you discover that your loved one requires a higher level of care, understanding and navigating health insurance are often the next steps toward getting the necessary treatment. While access to care and insurance coverage will vary, a basic understanding of the process will allow for prompt and more comprehensive treatment.

### HELPFUL THINGS TO DO



**Educate yourself  
and get organized**



**Take notes and  
save paperwork**



**Communicate with  
your insurance company**

### ERC Insurance Treatment Team

#### Patient Admission Coordinators

- Serve as liaisons between our patients and their insurance companies to ensure that all parties gain a clear understanding of the coverage and costs associated with the treatment at Eating Recovery Center. These costs will vary based on each patient's insurance and payment circumstance.

#### Patient Registration Representatives

- Meet with patients and/or families on the day of admission to answer financial questions and provide guidance.

#### Medical Billing Specialists

- Compile and enter patient service data, forward the data to your carrier via paper or electronically and apply payments received to your account.

#### Patient Financial Counselors

- Provide financial guidance during a patient's stay with us regarding insurance complications and self-pay information as needed.

#### Patient Account Coordinators

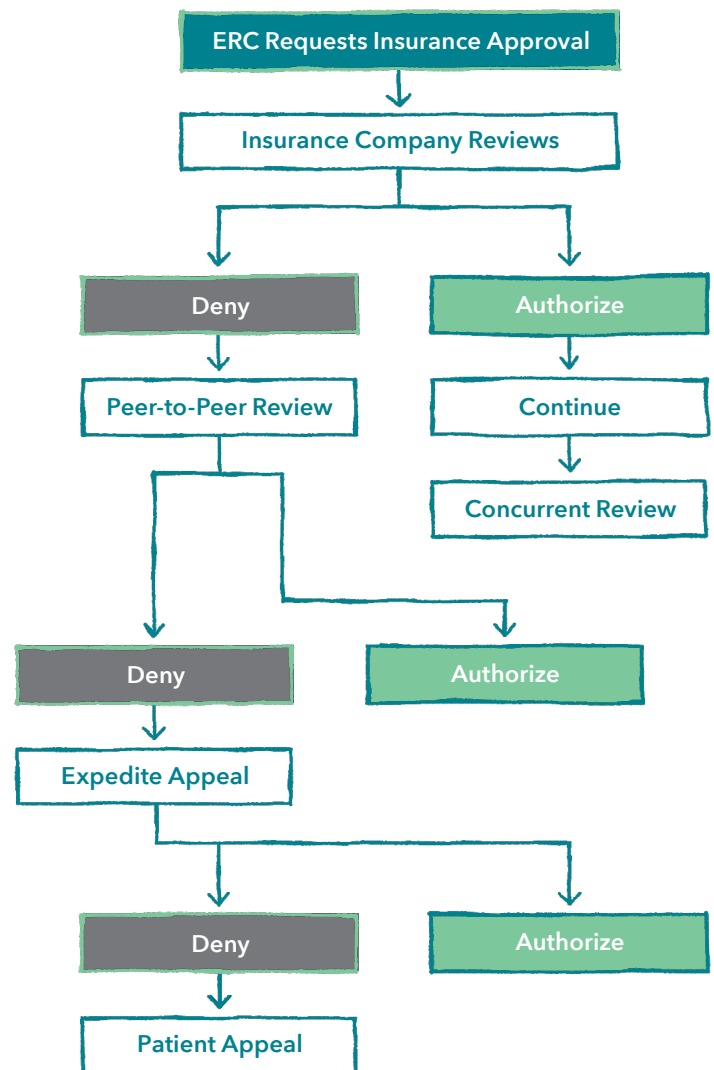
- Follow insurance claim process to final adjudication and communication regarding account balances.

# TREATMENT STAY AT EATING RECOVERY CENTER



- Each patient is assigned a Patient Financial Counselor to provide financial updates as determined by the insurance company throughout treatment.
- Concurrent reviews are a normal part of the insurance approval process. The insurance company will be speaking with your ERC utilization review team consistently, typically every few days.
- Your utilization review team consists of ERC licensed clinicians who speak with your insurance company on a regular basis to determine if medical necessity guidelines are being met.
- A peer-to-peer review will be held if an initial denial is received from the insurance company. The attending ERC psychiatrist or psychologist will speak with the insurance company's psychiatrist to discuss the case.
- An expedited appeal will follow if the insurance company stands firm with the denial. The ERC business office has 72 hours to complete the expedited appeal.

## Concurrent Review Process (Sample Outline)



## Resources

- **NAMI - The Health Insurance Appeals Guide**



For additional resources, visit [EatingRecovery.com/FamilyFriendsSeries](https://EatingRecovery.com/FamilyFriendsSeries)  
For more information or if you have questions, please email [Resources@ERCPATHLIGHT.COM](mailto:Resources@ERCPATHLIGHT.COM)