

# Frequently Asked Questions

## How does ELAP Services work with our company's health plan?

ELAP Services works with your company to reduce hospital and facility healthcare costs. We audit all hospital and facility claims to ensure that hospital payments do not exceed your health plan's limits and are accurate based on the services rendered.

With the support of ELAP Services, you can be assured that your company is taking a proactive approach to manage high healthcare costs.

## What is different about the claims review process with ELAP?

ELAP works with your plan's Third-Party Administrator (TPA) to ensure hospital and facility claims do not exceed the plan's limits. Here's how...

1. TPA sends all facility bills to ELAP for audit/review
2. ELAP sends the post audit results to the TPA
3. TPA sends the member a notice regarding the adjusted claim payment along with the Explanation of Benefits (EOB) that details the member's out-of-pocket responsibility.

A notice is also sent to the provider regarding the audit findings and the out-of-pocket due, along with the payment. Providers have the right to appeal to the plan.

## What types of medical bills does ELAP review?

Our focus is on expenses from facilities including hospitals, outpatient surgery centers and skilled nursing facilities.

## What happens if a hospital or facility bills a plan member for an amount above the allowable limits (post ELAP Audit)?

If any plan member is billed beyond their deductible, copayment or coinsurance amount, this is called balance billing. When this happens, the plan member needs to contact us and send us the bill in question via fax, email or mail...

**Email:** [balancebills@elapservices.com](mailto:balancebills@elapservices.com)

**FAX:** 888.560.2447 ATTN Member Services Dept.

**Mail:** 1550 Liberty Ridge Drive, Suite 330 Wayne, PA 19087

The ELAP Process works best when we are notified of member balance bills as they happen. It allows us to address the billing issue right away which typically results in better outcomes.

## What if a facility requests payment up front or denies care due to outstanding balance billing?

ELAP will audit the facility bill and in many cases, the amount owed for deductibles and coinsurance will be reduced. If plan members pay up front, there is a risk that they will overpay and the facility will not reimburse them.

The only out-of-pocket expense that a plan member should pay to the facility in advance of or at the time of service is a copay or deductible (if applicable). Plan members can contact your Third-Party Administrator (TPA) to confirm copay and/or deductible amounts.

If the facility will not perform treatment without the receipt of additional funds outside of the plan member's copay or deductible, the plan member should contact your TPA immediately and request to speak with a representative.

## What happens when a plan member contacts ELAP about balance billing?

Your plan member will receive assistance from a Member Services Advocate throughout the balance billing process. Our legal team will also go to work right away to handle the billing issue with healthcare facilities and collection agencies. All your plan member has to do is send us any bills or notices as they are received.

## What if a plan member receives a collection notice or phone call?

The collection notice or call received should clearly state that the plan member has 30 days to respond and dispute the debt. The plan member must contact ELAP right away so that our legal team can respond within that timeframe.

## Will a collection notice affect a plan member's credit?

Plan members often fear that their credit will be damaged when a provider threatens to send or does send a bill to a collection agency. This does not necessarily mean that it was reported to any credit reporting agency. To avoid additional issues, we strongly encourage plan members to reach out to us right away.

**QUESTIONS about a hospital, surgery or skilled nursing facility bill?**

**Contact us right away.**



**Your health plan's affordability partner.**

Member Services 1-800-977-7381 9 a.m. - 7 p.m. ET  
FAX 1-888-560-2447 • [balancebills@elapservices.com](mailto:balancebills@elapservices.com)