

A hand is shown placing a dark blue wooden block with a white plus sign on top of a stack of light-colored wooden blocks. The background is a solid blue color. The title text is overlaid on a dark blue horizontal band across the middle of the image.

Getting the Most From Your Health Insurance

Practical ways to use your coverage, avoid unnecessary costs, and find benefits you may not know you have.

Having insurance is one thing. Knowing how to use it well can help you spend less, avoid surprises, and get more value from the coverage you already have.

Make preventive care work the way you expect

Before the visit

- When scheduling, say you are booking a preventive or wellness visit and confirm the provider is in-network for your exact plan.
- Call the Member Services number on your insurance card and ask: “Is this preventive visit covered at no cost under my plan?”
- Ask whether routine labs, screenings, or vaccines are included or could be billed separately.

One important catch

- Preventive services can have age, frequency, and eligibility rules. \$0 cost is not guaranteed in every situation.
- If you also discuss or receive treatment for a new health concern, part of the visit may be billed differently.



Confirm providers the smart way

1. **Search the insurer's provider directory.** Choose the exact plan/network, then search the provider name and location.
2. **Call the provider's office.** Ask: “I have [insurance company], specifically the [exact plan name]. Are you in-network for this plan, and are you accepting new patients?”
3. **Confirm with your insurer.** Call Member Services and verify the specific provider and location are in-network.
4. **Ask about plan rules.** Does your plan require you to choose a primary care provider or get a referral before certain specialists?



Know your lower cost care options

For non-emergency needs, the cost often moves roughly from lower to higher as you move across this list. Your plan may differ.

Nurse advice line

Often included; useful when you are unsure what level of care you need.

Telehealth

Often lower cost for some common non-emergency needs.

Primary care / retail clinic

Often a lower-cost choice for routine or straightforward care.

Urgent care

For problems needing quicker attention that are not emergencies.

Emergency room

Usually the most expensive setting, but the right place for serious emergencies.

Important: Never delay emergency care because of cost. In a true emergency, seek emergency care or call 911.

Before paying more than expected for a prescription

1. **Check the formulary.** Search your plan's covered-drug list for the medication and note any tier or special rules.
2. **Check the pharmacy.** See whether your plan has preferred pharmacies, mail-order options, or 90-day fills that may cost less.
3. **Ask about alternatives.** If the cost is high, ask your prescriber whether a generic or another covered medication may be appropriate.
4. **Compare insurance with cash or discount prices.** Prescription discount programs or a pharmacy's cash price can sometimes be lower. If you pay outside insurance, it may not count toward your deductible or out-of-pocket maximum, so check your plan if that matters to you.

Still too expensive? A WorkLife Navigator can help explore other savings or assistance resources.

A few setup steps can save time later

Set up your insurance account before you need it

Set this up now:

- Create your online account or download the plan app.
- Save your digital insurance card to your phone.
- Save the Member Services number in your contacts.

Know where to find these:

- Claims and Explanation of Benefits (EOBs)
- Deductible and out-of-pocket progress
- Provider directory and cost-estimator tools
- Claim/EOB notifications, if your plan offers them

Before planned care, ask twice

For a planned procedure, test, imaging appointment, or specialist visit, confirm details with both the provider and your insurance plan.

Ask the provider / scheduling office

- Are you in-network with my exact plan?
- Could another provider, lab, or facility also bill me?
- Can you give me an estimate of what I may owe?

Ask your insurance company / Member Services

- Are the provider and facility both in-network?
- Is this service covered by my plan?
- Do I need a referral from my primary care provider?
- Does this service require prior authorization?
- How will my deductible, copay, or coinsurance apply?

Referral: a written order from your primary care provider to see a specialist or receive certain services.

Prior authorization: approval your plan may require before certain services or prescriptions are covered.

Be an active participant in your care

You do not have to be a medical expert to ask questions, slow the conversation down, or get another perspective. A few simple habits can help you leave a visit understanding what happened and what comes next.

Be an active participant in your care

Make sure your needs are heard

- Write down the 2-3 questions or concerns you most want to cover
- Start with: “I want to make sure we talk about...”
- If something is unclear, try: “Can you explain that another way?” or “What does that mean for me?”
- Repeat back what you heard: “Just to make sure I understand, the next step is...”

It is okay to ask for more information

- Ask: “What are my options?” and “What are the pros and cons of each?”
- Ask what to expect next, what changes should prompt follow-up, and when or how to follow up.
- For an important diagnosis, procedure, or treatment decision, it is okay to ask about a second opinion. Check your plan for coverage.
- For a complex visit, consider taking notes or bringing a trusted person if you want support.

Do a 10-minute benefits audit

Log into your plan account or open your benefits guide and check for programs beyond regular doctor visits.

Mental health

Therapy, psychiatry, virtual behavioral health

Virtual support

Telehealth and nurse advice lines

Family support

Pregnancy, maternity, lactation, pediatric programs

Chronic conditions

Diabetes, asthma, blood pressure, condition-management support

Wellness

Health coaching, smoking cessation, weight-management tools

Other coverage

Prescription support, plus separate dental or vision benefits you may have

When Personal Guidance is Best, We Are Here

Can't find an in-network provider? Prescription too expensive? Unsure why something is not covered? A WorkLife Navigator can help you understand your options, prepare questions for your insurer, and explore additional resources when coverage does not fully meet your needs.

888.219.8993 | askthenavigator.org

