



# HMO-POS Member FAQs

## **Q What is an HMO-POS plan?**

Gold Kidney HMO-POS plans offer members access to a large number of providers. Members can obtain care from providers listed in the Gold Kidney Provider Directory.

The Point-of-Service (POS) benefit allows members to obtain care from doctors and specialists who are not in the Gold Kidney provider network, but are willing to provide care and services to members even though the provider does not have a contract with Gold Kidney.

## **Q How do Gold Kidney's HMO-POS plans work?**

Gold Kidney Health Plan is an HMO-POS Medicare Advantage Plan. Members are required to choose a primary care provider (PCP). Your PCP should help coordinate your care.

When you need care and services you can use providers listed in the Gold Kidney Provider Directory or you can use any doctor who is willing to provide care to you even, if they are out of network or not contracted with Gold Kidney Health Plan. The ability to use both in-network and out-of-network providers means you have access to many more providers for care.

## **Q If a doctor is not in the Gold Kidney Provider Directory, will I pay more?**

No. Unlike some healthcare plans, Gold Kidney copayments and coinsurance are the same when you obtain care from a provider who is in-network or out-of-network.

The out-of-network doctors will provide your care, charge the same copayment or coinsurance, and bill Gold Kidney for the rest of your care. The doctor must be willing to accept you as a patient and must bill Gold Kidney so we can pay them for your care.



**If you still have questions, give us a call:**

**1 (844) 294-6535**

### **HOURS OF OPERATION**

**Oct 1 - March 31:**

**8 a.m. - 8 p.m., local time,  
7 days a week  
(except holidays)**

**April 1 - Sept 30:**

**8 a.m. - 8 p.m., local time,  
Monday - Friday  
(except holidays)**

Gold Kidney Health Plan, Inc., is an HMO-POS and HMO-POS C-SNP with a Medicare contract. Enrollment in Gold Kidney Health Plan depends on contract renewal.

Gold Kidney Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, or sex (including pregnancy, sexual orientation, and gender identity).

Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

**Q Do I need a referral or authorization to see an out-of-network doctor?**

You will not need a referral or authorization for office visits with a doctor or specialist. Care that is provided in a doctor's office does not require authorization. While it is not a Gold Kidney requirement, your doctor may choose to write a referral for you so that a specialist will know why you are being recommended to them for care.

Prior authorization is required when you will be getting care in a hospital, outpatient surgery center, or ambulatory surgery center, or when you will be getting chemotherapy or radiation therapy, and for durable medical equipment items or prosthetics that cost more than \$500.

**Q What if the doctor wants to check with Gold Kidney before providing care?**

Your doctor can call the Gold Kidney Member Services team at **(844) 294-6535 (TTY: 711)** to confirm your eligibility, or they can visit the Gold Kidney website to get more information about the HMO-POS benefit and how they will be paid:  
[www.goldkidney.com/providers](http://www.goldkidney.com/providers).

We will provide the doctor's office with more information, which should enable you to schedule your appointment.

**Q Does the out-of-network benefit only apply to physician services?**

The HMO-POS benefit applies to all care providers. In addition to physicians, this includes behavioral health providers, labs and diagnostic imaging centers, and all other ancillary providers and facilities.

The out-of-network benefit does not apply to supplemental benefits that are provided through contracted vendors such as Silver&Fit, Papa, PERS, or others.

**Q Can a doctor refuse to provide care because they are not contracted with Gold Kidney?**

Except in emergency situations, a doctor or specialist can refuse to see you if they don't accept Gold Kidney insurance.

If this happens, please call Gold Kidney Member Services at **(844) 294-6535 (TTY 711)**, and we will assist you with finding a doctor who will provide the care you need. Gold Kidney will also ask the provider if they would like to participate in the Gold Kidney network of providers, but not every doctor will agree to join.