

HMO-POS Member FAQs

What is an HMO-POS plan?

A Health Maintenance Organization – Point of Service (HMO-POS) plan offers you access to providers and health systems in-network (HMO) while also allowing access to providers and health systems out of network (Point of Service).

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.

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 innetwork and out-of-network providers means you have access to many more providers for care.

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

You can go outside of the network for care, however, there may be a difference in cost share (copay or coinsurance) for the services received out-of-network. Refer to your Evidence of Coverage (EOC) benefits which are highlighted in Chapter 4, Section 2 for details on cost share in-network or out-of-network. You may find these materials on our website at www.goldkidney.com/planoverview/.



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)

FOR EDUCATIONAL PURPOSES ONLY.

Gold Kidney Health Plan, Inc., is an 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).



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.

Some services may require Prior Authorization. Additional details about Prior Authorization and when it may be necessary can be found in Chapter 4, Section 2 of the EOC available at www.goldkidney.com/plan-overview/. You may also contact the Gold Kidney Member Services team at (844) 294-6535 (TTY: 711) for details about Prior Authorization.

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.

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

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

The HMO-POS benefit applies to participating health care providers who are in-network or those providers who are willing to provide services out-of-network. 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 dental, vision, or hearing services.

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.