

What to bring to an appointment

If it is your first visit to a new doctor, you will need to bring a few things with you to your appointment. Make sure to show up early for your appointment and when you arrive, check in with the front office staff.

The front office staff may ask you to provide the following:

- ◆ Your insurance card
- ◆ Photo identification like a driver's license or government or school ID
- ◆ Any forms the doctor sent you ahead of time to fill out

When you see the doctor, you may want to provide:

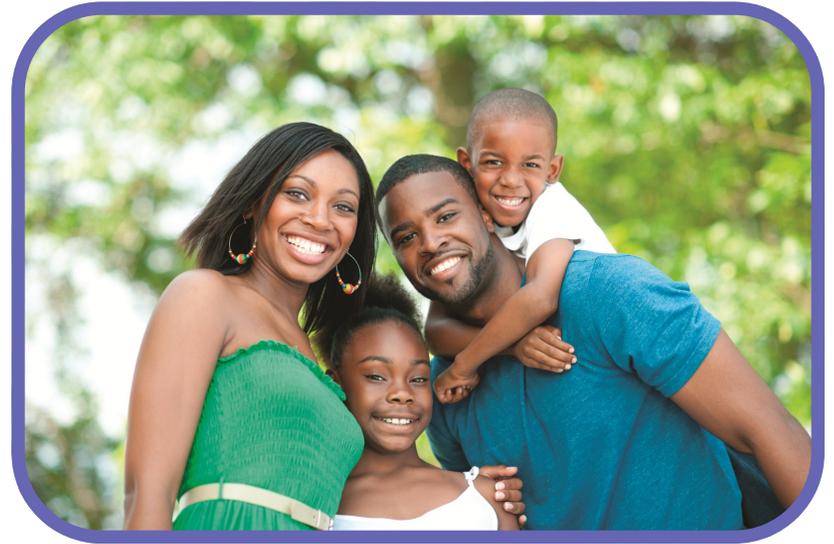
- ◆ Your family health history and any medical records that will help the doctor understand your current health care needs
- ◆ Medications you are taking, their dosage and frequency
- ◆ Questions or concerns that you have about your health

After you see your doctor:

- ◆ Check out with the office staff
- ◆ Pay for your visit if you have a deductible, coinsurance or copay that would apply
- ◆ Make any follow up appointments needed

Know when to use Emergency Care

When you are sick or injured, you need to know how to get the care you need quickly. Many primary care doctors offer same-day appointments for illness or injuries. If you can't make an appointment with your primary care doctor, you may find that your plan covers an urgent care or "red-care" office where you can walk-in without an appointment. If your situation is life-or-death, hospital emergency rooms provide fast, life-saving care and are open 24 hours a day, seven days a week. However, if your situation is not life or death, going to an emergency room will likely cost you more money and you may have a longer wait time than if you went to your primary care doctor.



How to Use Your Health Coverage



Michigan Department of Insurance and Financial Services

DIFS is an equal opportunity employer/program.
Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.
Visit DIFS online at: www.michigan.gov/difs Phone DIFS toll-free at: 877-999-6442

How to pay for health insurance

Depending on how you get your coverage, you may have a premium. A **premium** is the amount that must be paid for your health coverage. You and/or your employer usually pay the premium monthly, quarterly or yearly. To keep your coverage, you must pay your premiums on time.

Once your coverage is in effect, you will typically have additional costs. Insurance only covers part of your care. Many plans have a **deductible** which is a set yearly amount that you have to pay towards the health care services you receive before your insurance begins to pay. Once you have reached your deductible, your coinsurance and copays begin. **Coinsurance** is the portion you pay for a medical service calculated as a percent of the total billed amount for the service. **Copay** is the fixed portion you pay for a medical service.

What insurance covers

Health insurance helps pay for doctor visits, hospital services and medications. After enrolling in health insurance, you probably received a membership package with information about your coverage. If it wasn't included, ask your insurance company for a "Summary of Benefits and Coverage" document that explains the key features of the coverage, such as the covered benefits, cost-sharing provisions, and coverage limitations and exceptions.



Find a doctor

Although you can get health care services in many different places, including an emergency room, it's best for you get routine care from a primary care doctor. A primary care provider helps you prevent health problems and treats you when you are sick. If you are an adult, your primary care doctor may also be called a primary care provider, family physician, internist, general practitioner, nurse practitioner or physician's assistant. Your child's primary care doctor may be called a pediatrician.

To find a primary care doctor, you may want to:

1. **Contact your insurance company.** Call your insurance company, look at their website, or check your insurer's member handbook to find doctors that are covered in your network. In order for your insurance to pay for medical services, you will need to go to a doctor that takes your coverage.
2. **Ask around.** Ask your family and friends who they go to and what they like about them. If you hear of a doctor that sounds good, double check with your insurance company that they are in your plan's network.
3. **Contact the doctor.** Call the doctor's office to help make your decision. You would want to ask if the doctor is accepting new patients with your coverage. You may also want to ask about the ease of getting appointment times that work for you and which hospital(s) the doctor works with.

Make an appointment

When you call your doctor to make an appointment, you should say:

- ◆ Your name and the name of the doctor you see at the practice (or state that you're a new patient.)
- ◆ The reason you'd like an appointment, for example you are sick with a sore throat or are having a problem with allergies. You may also want an appointment for a "yearly exam" or a "wellness visit" or to get immunizations or other preventive services.
- ◆ The name of your insurance plan and other information from your insurance card, such as your member and group numbers.
- ◆ The days and times that work for you to come in. (Depending on your needs and the schedule of the doctor you may be able to be seen that day or you may have to wait a few weeks to get an appointment.)