

FAQ's about Billing & Insurance

Willamette Health & Wellness



1. What is the difference between a deductible and the out of pocket max?
 - a. A **deductible** is the cost a policyholder pays for their healthcare before the insurance plan starts covering any expenses, whereas an **out-of-pocket maximum** is the amount a policyholder must spend on eligible healthcare expenses through copays, coinsurance, or deductibles before the insurance starts fully covering all covered expenses.
2. What is the difference between in network providers/insurance versus out of network providers/insurance?
 - a. **In-network** providers have contracted with your insurance company to accept certain negotiated (i.e. discounted) rates. **Out-of-network** providers have not agreed to the discounted rates. Patients are responsible for paying for anything their insurance does not pay for.
3. What is a CPT code?
 - a. Rates are based on required national standards (called CPT codes). CPT codes vary by visit type, type of provider, time spent, and complexity of visit. Coding for a visit can only be determined once a visit is complete. A single visit may include two or more CPT codes, per the national standards.