

LIFE OF A MEDICAL CLAIM

Members see a network provider.

Copayments are due at time of service by member.*

Generally, members should **not** pay **deductible** or **co-insurance** at the time of medical service.**

Provider bills BCBSVT first, based on services performed

BCBSVT processes claim based on codes submitted and health plan of the member.

Member receives a bill from a provider and an SHPP*** from BCBSVT.

If a member is responsible to pay can be done by one or more of the following methods:

- HRA, FSA or HSA
- Cash/Check/Credit Card
- Payment Plan

Provider sends bill to member, if appropriate, based on the allowed amount and member responsibility.

BCBSVT sends determination of benefits to:

- Member (via SHPP***)
- Provider
- Third Party Administrator *** (if applicable).

* Some providers may waive collection of copayments at time of service when an HRA will pay on member's behalf.

** Some providers may request a portion of a deductible be paid ahead of a planned major service.

*** Summary of Health Plan Payments– Members can find their SHPPs online at the [BCBSVT Member Resource Center](#)

**** TPAs also know as HRA/HSA vendors