

BCBSKS facts for members

Clarification of Published Inaccuracies by Hutchinson Clinic

Hutchinson Clinic has published FAQs on their [website](#) which may be confusing to Blue Cross and Blue Shield of Kansas (BCBSKS) members. Below are facts on the statements Hutchinson Clinic has published. For questions on your plan's coverage, please call our Customer Service Center at (800) 432-3990.

BCBSKS remains open to discussions with Hutchinson Clinic. They continue to ask for reimbursement rates higher than those of similar providers across the state. As champions for our members, we advocate for high-quality, cost-effective health care that gives providers a fair margin and enables us to offer competitively priced coverage to employers and members.

Statement: Blue Cross and Blue Shield of Kansas members can receive care at the Hutchinson Clinic.

BCBSKS information: Yes, you can receive care at Hutchinson Clinic, but there is additional information you need to know. Beginning Jan. 1, 2025, Hutchinson Clinic will be considered out-of-network for BCBSKS members. Please review your Summary of Benefits and Coverage so you know what your responsibilities will be and whether your plan includes out-of-network coverage. If your plan does have out-of-network coverage, BCBSKS will reimburse the member for any covered services you receive according to your benefits and you'll pay the provider directly, in addition to any deductibles, coinsurance or copayments. You may be billed more than what BCBSKS reimburses. If your plan doesn't include out-of-network services, you'll owe 100% of the charges.

After Dec. 31, 2024, the Clinic won't be able to access your benefits and eligibility info. They won't have access through our systems or Customer Service. If you have any questions about your benefits, BCBSKS will be here to help you directly.

Please note these changes will not impact those with Medicare Supplemental and Hutchinson Clinic does not currently contract with us for Medicare Advantage plans. Please see the entry below for information on federal employee retirees.

Statement: Federal Employee Program retirees will not be affected.

BCBSKS information: Under the FEP Program, if Medicare is your primary coverage (meaning it pays first) and you have Standard Option, BCBSKS will continue to provide secondary coverage. If you have Basic Option or FEP Blue Focus, Medicare will pay their portion of your service; however, BCBSKS will not pay as secondary.

Statement: Being in-network doesn't always mean lower costs for patients.

BCBSKS information: Health plans contract rates with in-network providers to save members money. Health plans do not contract with out-of-network providers. Hutchinson Clinic will be an out-of-network provider beginning Jan. 1, 2025. Please see example handout for a breakdown of how out-of-network and in-network care work for the same services.



Statement: Hutchinson Clinic is going out of network because insurance premium funds should be reinvested into your local providers.

BCBSKS information: Our reimbursement rates are the same for all professional providers of the same licensure across the state. We also include additional reimbursement opportunities for those who meet higher quality metrics. We communicate with providers in July regarding reimbursement rates for the upcoming calendar year.

As a member-owned, not-for-profit company, we are owned by you, our members. We do not have shareholders to pay or stock prices to worry about. That allows us to solely focus on doing what's right for our members and our communities. Every dollar that comes to BCBSKS through premiums is either used to pay member claims, pay taxes, or cover operating expenses. Any money we have is earmarked to reinvest in the company and the communities we serve. In Reno County, that includes partnering with Heal Reno County to implement sustainable changes to improve healthy living, healthy eating and commercial tobacco use.

Statement: There will be no additional costs to Hutchinson Clinic patients at time of service.

BCBSKS information: Please review your Summary of Benefits and Coverage so you know what your responsibilities will be and whether your plan includes out-of-network coverage. While you may not pay things up front, it's important to know what you will be responsible for when the bill comes. If your plan does have out-of-network coverage, BCBSKS will reimburse you for any covered services you receive according to your benefits and you'll pay the provider directly, in addition to any deductibles, coinsurance or copayments. You may be billed more than what BCBSKS reimburses. If your plan doesn't include out-of-network services, you'll owe 100% of the charges.

Visit us at bcbsks.com



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