



Surgery Guide



Knew Health is not an insurance company nor is the membership offered through an insurance company. Knew Health Membership does not satisfy state or federal requirements for healthcare coverage or minimum essential coverage. This is not a legally binding agreement to reimburse or indemnify you for medical expenses you incur. There is no guarantee of payment of medical expenses you incur.

Big healthcare moments, like a surgical procedure, can be stressful and you may not be certain of the steps you should take as a Member of Knew Health. We've created this guide to smoothly lead you through the surgery process, ensuring you're well-informed and supported from start to finish. Our goal is to make sure you feel fully backed by our community's support every step of the way and confident that this is the right care for you.

Did you already have surgery?

If the surgery has already occurred due to an emergency, please disregard the following steps and instead contact your Needs Team directly at 855-925-1281 or needs@knewhealth.com.

If you've been recommended for surgery and it's not an emergency, what should you do?

We encourage all Members to contact our Needs Team directly at 855-925-1281 or needs@knewhealth.com as soon as possible after being recommended for surgery to help navigate this process. Members should have their request reviewed for sharing eligibility before surgery whenever possible. If your surgery is imminent (scheduled within the next few weeks), please notify the Needs Team so we can assist in expediting this process.

How You Can Help

1. Contact the Knew Health Needs Team as early as possible in the planning process at 855-925-1281 or needs@knewhealth.com. With our savvy Team at your side, we can help with obtaining records, second opinions, and fair rates quickly.
2. Inquire about fair-cost surgical facilities, typically out-patient facilities. Facility charges are generally the most expensive part of a surgery and costs can be reduced using fair-priced, high-quality surgical facilities.
3. Request medical records from any relevant provider. Please notify the Knew Health Needs Team if you would like assistance in obtaining these records.
 - clinic notes
 - radiology/imaging reports
 - referrals
 - prescriptions, etc.
4. Obtain itemized estimates for the procedure, including:
 - facility fees
 - procedure fees
 - physician fees
5. Obtain a Letter of Medical Necessity.
6. Submit the documents to the Needs Team as they are received so they can be reviewed in a timely manner.

Our Team will need to establish Medical Necessity

Knew Health has a commitment to you and all Members to ensure that we share in care that is medically necessary. One of the biggest culprits related to overspending in healthcare is unnecessary care. So it is our responsibility to you to establish that care is necessary for your health and wellbeing, and to continue to keep monthly costs fair and consistent for you.

Necessary care is defined as services or procedures vital for restoring or maintaining physical function provided in a setting that aligns with cost-effectiveness and your health condition. It is important to note that not all prescribed, administered, or recommended services automatically qualify as medically necessary.

What should a Letter of Medical Necessity include?

- **Diagnosis:** Confirmation of the medical condition being treated.
- **Goals:** Please include both short-term and long-term objectives.
- **Treatment Methods with Itemized Estimates:** Detailed descriptions of the interventions, therapies, medications, or procedures planned, along with an itemized cost estimate for each.
- **Timeline:** An estimated schedule for the initiation and duration of the treatments.
- **Provider(s) Involved:** A list of all healthcare providers who will be involved in the care, including any specialists, therapists, and primary care physicians.
- **Monitoring and Follow-up:** Information on planned regular assessments to monitor progress and any necessary adjustments to the treatment plan.
- **Prognosis:** Expected outcomes and criteria for evaluating the success of the treatment in achieving the stated goals.

Should I consider a second opinion?

Knew Health highly encourages seeking expert second opinions before proceeding with surgical interventions. Second opinions provide valuable insights into your diagnosis and treatment options. They are a valuable tool that will ensure that you fully understand the care being provided and that you are confident that this is the right care plan for you.

If you would like to have a second opinion, please let us know and we can help coordinate one at no cost to you. Contact us at 855-925-1281 or needs@knewhealth.com.

What if my surgery is related to a pre-existing condition?

If your surgery is related to a pre-existing condition, the costs are subject to a phase-in period wherein sharing is limited starting from your Membership Effective Date. The ability to share enhances progressively:

- Year One: \$0 (waiting period)
- Year Two: \$25,000 maximum per need
- Year Three: \$50,000 maximum per need
- Year Four and Beyond: \$125,000 maximum per need, annually resetting each membership year.

If your surgery is related to a pre-existing condition, the Needs Team will continue to provide assistance to ensure that your costs are as reasonable as possible through our expertise even if sharing is limited.

What are Usual, Reasonable, and Customary (URC) costs and why are they important?

To align with our sharing principles, the costs associated with your surgery must meet the Usual, Reasonable, and Customary standards. We ask that you provide written, itemized estimates from your medical providers for all known upfront costs, including those for the surgeon(s), facility, and anesthesia (when available). This information is crucial for determining how much Knew Health can fairly and equitably share.

By obtaining and sharing in reasonable costs, we continue to be able to provide consistent monthly rates for you and we take a stand as a Community against inflated healthcare spending.

How will surgical costs be shared?

As payment policies for self-pay patients vary from provider and hospital, we highly encourage verifying with your providers in advance. Once sharing eligibility has been approved, Knew Health generally advises members to pre-pay up to 50% of the estimated surgery cost in advance. This approach significantly simplifies the process of final billing adjustments. Don't hesitate to reach out to the Needs Team for guidance on making payments.

Once your surgery receives approval and is scheduled, Knew Health can facilitate the sharing of costs up to two weeks in advance.

It's important to remember that your Initial Unshareable Amount must be fully satisfied before any expenses can be shared with the community.

Have you signed up for Direct Deposit?

By default, Members received shared funds via paper check, but waiting for a paper check may not be ideal. If you have not already signed up for direct deposit for shared funds, you can do so through your Member Portal or by [following this link here](#). This will ensure that shared funds reach you as quickly as possible.