



HEALTH INSURANCE PLAN BENEFITS AND COVERAGE

Questions to ask

I am having an ablation procedure



Does my health insurance plan cover catheter ablation procedures for treating Atrial Fibrillation (AFib)?

Catheter ablation procedures have long-standing coverage by most commercial healthcare insurance plans, as well as Medicare, based on being a medically reasonable and necessary treatment option for AFib. If you are a candidate for ablation, check with your health insurance plan to confirm coverage. Sometimes different insurance plans may require a Prior Authorization before confirming coverage. Your physician's office will then coordinate with your insurance prior to your scheduled procedure.



Will I have out-of-pocket costs related to my ablation procedure?

This is highly dependent on your health insurance plan and the type of coverage that you have. Because of the variation in coverage by different health plans (e.g., HMO, PPOs, Medicare and Medicare Advantage Plans), it is important to check with your health plan to understand what they will cover and what your out-of-pocket responsibility may be.



What is a Prior Authorization?

A Prior Authorization (PA) may be used by your insurance company to assess if the ablation procedure will be covered partially or fully. Your physician and their office will work with your insurance company to complete the appropriate forms. Your insurance company will review the request and can either be approved or denied. If a PA is denied both yourself and the physician may have the ability to ask for a review of the decision and appeal the decision.



What can I do to ensure that my ablation procedure will be processed appropriately by my health insurance plan?

It is good practice that with any planned procedures, such as ablation, you will work closely with your doctor and the hospital to best coordinate what your health insurance will require in advance of the procedure.

You will need to bring your current insurance card(s) to your doctor's appointment to ensure that the doctor's administrative personnel can verify benefits and coverage for the procedure. Please confirm with your health insurance that all information and actions are handled prior to your procedure.

Insurance Checklist

- ☐ Provide your physician's office with your benefit plan information (plan type, insurance numbers, copy of cards, and contact information)
- ☐ Verify relevant medical history and symptoms
- ☐ Contact your benefit provider and verify your benefits and out-of-pocket costs, (co-pay, deductible, and out-of-pocket maximum)
- ☐ Verify your eligibility and medical policy requirements for an ablation procedure
- ☐ Verify your physician and facility network status with your benefit provider

If you have additional questions please contact the Abbott Reimbursement Hotline at **855-569-6430** or **Abbottconomics@abbott.com**

Download the smartphone app built for AFib patients like you today!



For more resources, visit **www.afanswers.com**



Always consult your doctor with questions about AFib, symptoms, or best treatment options.

These materials are not intended to replace your doctor's advice or information. For any questions or concerns you may have regarding the medical procedures, devices and/or your personal health, please discuss these with your physician.

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