Yale HEALTH

Yale Health Bulletin

Referrals

How the Yale Health coverage works regarding referrals: for care beyond your basic health needs, you typically need a referral. This process usually starts with your primary care provider (PCP). However, having a referral from your PCP, or another provider doesn't automatically mean it's approved. The referral will be reviewed, and you'll be informed of its status. **It's important not to get care until you have an approved referral**.

An approved referral (prior authorization) is required for various services, including:

- Care outside the Yale Health Center
- Yale Health Allergy
- Yale Health Dermatology
- Yale Health Diagnostic Imaging
- Yale Health Endoscopy
- Yale Health Infusion
- Laboratory Services (beyond routine blood draws)
- Yale Health Nutrition Counseling
- Physical Therapy
- Yale Health Specialty Services

You **do not need a referral** for these services if rendered at the Yale Health Center:

- Acute Care
- Behavioral Health
- Immunization
- Obstetrics & Gynecology
- Ophthalmology/ Optometry

If you have any questions about referrals, you can contact the Referrals Department by phone at 203-432-7397 or via email, Monday through Friday, from 8:30 am to 5 pm.



Questions about your membership coverage or want to discuss your new Yale Health membership? <u>Schedule a new member meeting & tour with me!</u>

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Claims

If you have questions about your bills or claims, the <u>Claims Department</u> is here to help. They can assist with things like:

- Bills you received for medical care outside the Yale Health Center
- Explanation of Benefits (EOB)
- Medical Claims

If you've paid for medical services or equipment out-of-pocket and have an approved referral, you can request reimbursement by using a Supplemental Claim Form, which you can find on the Forms & Guidelines page.

When submitting claims for medical services, make sure to include detailed bills and, if available, additional medical records (avoid using charge card receipts or balance due statements).

The bills should include:

- Your name
- Type of service
- Date of service
- Diagnosis
- Cost
- Procedure code

You can contact the Claims Department by phone at 203-432-0250 or through email, Monday to Friday, from 8:30 am to 5 pm.



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