

## UNDERSTANDING INSURANCE VERIFICATION FOR RESEARCH PARTICIPANTS

### JOHNS HOPKINS MEDICINE



#### INTRODUCTION

Johns Hopkins Medicine has a three-part mission in which Education, Research and Clinical Care are equally important and the cornerstone of everything we do. The innovative research conducted at Hopkins is vital to both medical advances and unsurpassed patient care. We appreciate your consideration to participate in clinical research.

#### FINANCIAL CLEARANCE

Once your care team has determined you are a candidate for one or more clinical trials, a notification is sent to the Clinical Trial Insurance Clearance team. The goal of the Clinical Trial Insurance Clearance team is to contact your insurance to make sure services that are not paid by the study sponsor will be covered by your insurance. This step is necessary to minimize your out-of-pocket cost while receiving treatment and services at one or more of the Johns Hopkins facilities.

#### INSURANCE AND RESEARCH PARTICIPANT FINANCIAL RESPONSIBILITY INFORMATION SHEET

As part of your informed consent process, you will receive a copy of the *Insurance and Research Participant Financial Responsibility Information Sheet*. This form outlines what items and services will be the responsibility of the research study sponsor and which will be billed to you or your insurance(s).

>> Please note that for claims submitted to your insurance, you are still responsible for deductibles and co-payments.

#### FREQUENTLY ASKED QUESTIONS

**Q. What is the process for contacting my insurance?**

A. The Clinical Trial Insurance Clearance team will review the services that will not be paid by the study sponsor. We will contact your insurance to make sure these services will be paid if you participate on the clinical trial. We will request a referral from your Primary Care Provider and an authorization from your insurance if necessary.

**Q. How will I be notified of the insurance decision?**

A. A member of your care team will contact you once we receive the decision from your insurance company.

**Q. Who do I contact if I have questions?**

A. If you have questions, notify one of your care team members. The care team will reach out to the Clinical Trial Insurance Clearance team who will contact you to answer your questions.

**Q. What will be my out-of-pocket costs?**

A. You will still be responsible for any copays, deductibles, co-insurances, and out-of-pocket limits required by your insurance. Please contact your insurance for more information.

**Q. I do not have insurance. What are my options?**

A. If you do not have insurance, you can be self-pay or apply for Financial Assistance. Please speak with your care team for additional information. You can also call 1-855-662-3017 for assistance.

**Q. I have a Medicare Advantage plan. Do I have research coverage?**

A. If you are enrolled in a Medicare approved study, the claim will be submitted to Original Medicare (as a primary) and to your Medicare Advantage plan as a secondary.

If you are enrolled in a study that involves a medical device, your claims will be submitted to your Medicare Advantage plan.

**WHAT CAN YOU DO?**

- Make sure that you are familiar with the *Insurance and Research Participant Financial Responsibility Information Sheet* that is part of the consent process
- Make sure that you are aware which insurance is your primary and your secondary. It is your responsibility to contact your insurance(s) with coordination of benefits questions.
- Make sure that you understand if Hopkins is out-of-network for you and where you can have labs and radiology performed
- Make sure that you know if you have met your deductibles for the year