

# Let's Talk: Lower costs from in-network providers

***Presenter – Karen McBride, Director of Network Management***

## **If Aetna's behavioral health resources are of the highest quality does that mean higher costs to the member?**

When seeking help for a behavioral health issue, costs shouldn't be another source of stress. We have determined specific in-network rates that usually cost less than if you sought care from out-of-network provider.

Our network providers and facilities can't charge the member more than the in-network rate for covered behavioral or medical services. Members are only responsible for their cost share and that means their co-insurance, copay, deductible, or any non-covered services according to the benefit plan.

Unlike in-network providers and facilities, out-of-network providers and facilities can set their own fees, and bill for any amount over what Aetna allows and those payments don't count towards a member's deductible.

But, if you want to use out-of-network benefits, you might want to contact us first. We can help you understand the cost differences between going to an out-of-network provider or staying with an in-network provider.

**Need help finding a provider? Use DocFind in Navigator, or call us at the toll free number on your member ID card for further assistance**

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