









# **EASY AS 1-2-FREE!**

When you choose KPP*Free*", your medical service is covered at **100%**, with **no cost to you**! With more than 200 provider locations, and thousands of procedures, tests, imaging, and other services, using KPP*Free*" is an easy choice!



Call us! Call our Kempton Care Advocate team at the number on your ID card to find out if your procedure is available through KPPFree™, discuss your benefits, and see if using KPPFree™ is your best option.



Our team will assist you every step of the way. Remember, reasonable travel expenses can be reimbursed, including hotel, mileage, etc.



After your appointment is scheduled, you will be provided with a KPPFree™ Voucher to present to the provider at the time of service.

## **Services Available**

There are thousands of medical services that can be performed through the  $KPPFree^{TM}$  program.

Examples of services available:

- General Surgeries
- Diagnostic Imaging
- Orthopedics
- Gastrointestinal
- · Ear, Nose, & Throat
- Cardiac
- Oncology
- Gynecological
- Ophthalmological/Ocular
- Kidney
- Sleep Disorders

## Don't forget your Preventive Services!

Many of your preventive screenings can be done through the KPPFree™ program. If a diagnosis is found, you can be confident that you won't receive surprise bills, and you may be able to get treatment from the same high-value provider.

## KPP*Free*<sup>™</sup> Locations



Don't have a KPPFree™ option near you or want to use your current medical provider? Ask us about how any provider can "price match" and be reimbursed at 100% with a Cash Price Agreement!

## KPP*Free*™ Savings

KPPFree™ providers often charge 50-80% less than a traditional network provider. Since 2011, our clients have saved \$61 million over network discounts, while reducing or eliminating participant out-of-pocket cost.

## To learn more:

Call us at the number on your ID card or visit us online at KemptonGroup.com



# **EASY AS 1-2-FREE!**

When you choose KPP*Free*<sup>™</sup>, your medical service is covered at 100%, with no cost to you! With more than 200 provider locations, and thousands of procedures, tests, imaging, and other services, using KPP*Free*<sup>™</sup> is an easy choice!

STEP 1

First, your doctor must have determined that you need a procedure or surgery. He/she will make the initial determination regarding the procedure or service that you need.

Following your doctor's diagnosis, **call our Kempton Care Advocates** at the number on your ID card to see if your procedure is offered under KPP*Free*™.

Our Kempton Care Advocates offer full concierge service, including helping arrange travel and providing you with a KPPFree™ voucher that will enable your procedure to be covered at 100%.

STEP 2

After your appointment is scheduled, you will be provided with a KPP*Free*™ Voucher to present to the provider at the time of service.

When you arrive at your initial consultation, you will be required to produce your voucher. This helps to ensure that the claim goes through the proper channels and your procedure will be covered at 100%.

FREE!

Well done! By making this valuable choice, all your out-of-pocket costs are waived, and your health plan has also saved!

Remember. not every procedure or service is eligible, and the list of qualified procedures is subject to change at any time. New KPPFree™ providers and services are added every day!



We are here to help!
Call the number listed on your ID card.

Our Kempton Care Advocate team is available to assist you Monday - Friday, 8:00 a.m. - 5:00 p.m. CST.



# KNOW BEFORE YOU GO WORKSHEET

## **TALKING TO YOUR DOCTOR...**

KPP*Free*™ is a new type of enhanced benefit, which means your current doctor may not be familiar with the process.

Here are some talking points and a worksheet to assist you in discussing the program and getting the information you need.

If you are enrolled in a Qualified High Deductible Health Plan, or have other primary insurance, please review the information included at the bottom of this page and your Summary Plan Description.

## Talking Points...

- "I am enrolled in a self-funded plan and I am cost conscious."
- "I have an enhanced benefit that reduces or eliminates my out-of-pocket costs."
- "If this is a diagnostic test or procedure, I will need a copy of the physician's orders to start the KPPFree™ process."
- "Can you tell me the exact type of surgery or procedure I need?"
- "What is the name or CPT code for this procedure?"

What type of procedure do I need?  □ Imaging □ Diagnostic Test □ Surgery □ Other: □ Other: □ Are physician's orders required for this procedure? If so, will you provide me with a copy of the orders so that I can begin the process?  Physician's orders are necessary for procedures that are diagnostic in nature.  □ Yes, they are required, and I have received a copy. □ No, they are not required.  What is the exact name of the procedure or the CPT code(s)?  CPT codes are used to describe the procedure(s) or service(s) a patient needs to receive. More than one code may be utilized.  Procedure Name: □ CPT Code 2: □ CPT Code 3: □  What is the urgency level?  The KPPFree™ program is intended for voluntary and elective procedures that are not urgent in nature. If your medical service is urgent or time sensitive, we encourage you to consider using regular plan benefits.  □ Not time-sensitive □ Time-sensitive; not urgent □ Urgent; consider using regular plan benefits	Ask Your Doctor				
Are physician's orders required for this procedure? If so, will you provide me with a copy of the orders so that I can begin the process?  Physician's orders are necessary for procedures that are diagnostic in nature.  Yes, they are required, and I have received a copy. No, they are not required.  What is the exact name of the procedure or the CPT code(s)?  CPT codes are used to describe the procedure(s) or service(s) a patient needs to receive. More than one code may be utilized.  Procedure Name:  CPT Code 1: CPT Code 2: CPT Code 3:	What type of procedure do I need?				
copy of the orders so that I can begin the process?  Physician's orders are necessary for procedures that are diagnostic in nature.  ☐ Yes, they are required, and I have received a copy. ☐ No, they are not required.  What is the exact name of the procedure or the CPT code(s)?  CPT codes are used to describe the procedure(s) or service(s) a patient needs to receive. More than one code may be utilized.  Procedure Name:  CPT Code 1: CPT Code 2: CPT Code 3:  What is the urgency level?  The KPPFree™ program is intended for voluntary and elective procedures that are not urgent in nature. If your medical service is urgent or time sensitive, we encourage you to consider using regular plan benefits.	☐ Imaging ☐ Diagnostic Test ☐ Surgery ☐ Other:				
CPT codes are used to describe the procedure(s) or service(s) a patient needs to receive. More than one code may be utilized.  Procedure Name:  CPT Code 1: CPT Code 2: CPT Code 3:  What is the urgency level?  The KPPFree™ program is intended for voluntary and elective procedures that are not urgent in nature. If your medical service is urgent or time sensitive, we encourage you to consider using regular plan benefits.	copy of the orders so that I can begin the process?  Physician's orders are necessary for procedures that are diagnostic in nature.				
What is the urgency level?  The KPPFree™ program is intended for voluntary and elective procedures that are not urgent in nature. If your medical service is urgent or time sensitive, we encourage you to consider using regular plan benefits.	CPT codes are used to describe the procedure(s) or service(s) a patient needs to receive. More than one code may be utilized.  Procedure Name:				
The KPP <i>Free</i> <sup>™</sup> program is intended for voluntary and elective procedures that are not urgent in nature. If your medical service is urgent or time sensitive, we encourage you to consider using regular plan benefits.	CPT Code 1: CPT Code 2: CPT Code 3:				

## 24-48 HOURS PRIOR TO APPOINTMENT

24-48 hours prior to your appointment, confirm that you have received the following information.

21 To house prior to your appointment, committee and reconstruction and reconstruction.					
Have I received and printed my KPP <i>Free</i> ™ voucher?	☐ Yes ☐ No	If you have not received your Voucher, please call our Kempton Care Advocates at (800) 324-9396, Monday - Friday 8:00 a.m 5:00 p.m. CST.			
Do I know the location of my appointment?	□ Yes □ No	Please confirm the location of your appointment with the KPP <i>Free</i> ™ provider. For example, your consultation may be scheduled at a different location than your procedure.			
I am traveling, do I have the details and reservation information?	☐ Yes ☐ No	If you have not received this information, please call our Kempton Care Advocates at (800) 324-9396, Monday - Friday 8:00 a.m 5:00 p.m. CST.			

## AFTER YOUR PROCEDURE

Check with your KPPFree™ provider to find out if you will need follow-up care or services and reach out to us to review the benefit available.

Do I need post-operative care or follow-up appointments?	□ Yes □ No	Post-operative or follow-up appointments may not be included under KPP $Free^{\text{m}}$ and may be covered under regular plan benefits.
Do I need any durable medical equipment?	□ Yes □ No	Durable Medical Equipment (DME), such as crutches, walkers, and other equipment prescribed by your surgeon, may not be included for your specific procedure under the KPP <i>Free</i> ™ benefit and may be covered under regular plan benefits.
Do I need physical therapy?	□ Yes □ No	Physical therapy may not be included for your specific procedure under the KPPFree™ benefit and may be covered under regular plan benefits. Our Kempton Care Advocates can assist you in finding the best benefit for physical therapy.
Do I need any other continuing care or medical services?	☐ Yes ☐ No	These services may not be included for your specific procedure under the KPPFree™ benefit and may be covered under regular plan benefits. Our Kempton Care Advocates can assist you in finding the best benefit.

\*KPPFree™ is only available for covered services. Please refer to your Summary Plan Description for a list of covered services. This Consumer Driven Option is subject to the Plan exclusions, limitations, or other restrictions listed in the Plan which may apply. Under IRS guidelines, with the exception of ACA mandated Preventive Services, participants enrolled in a Qualified High Deductible Health Plan must meet their deductible before receiving a 100% benefit.



# **CASH PRICE AGREEMENTS**



## SAVE MONEY WITH A CASH PRICE AGREEMENT!

Talk to your provider about matching the KPPFree™ price so they can be reimbursed at 100% and you will have no out-of-pocket cost!\*



**Call Kempton** to find out if your medical service is available through the KPP*Free*™ program, discuss your benefits, and see if a Cash Price Agreement is **your best option.** 



Talk to your provider about the enhanced benefit available to you if they agree to match, or closely approximate, the KPPFree™ bundled price.



Remember, **all services** required for the service or procedure are **bundled** under KPP*Free*™. These same services **must** also be **included** in your provider's offer.



The Kempton Care Advocate will provide you with a **Cash Price Agreement**. If your provider signs the CPA, your procedure will be covered under the **KPPFree<sup>TM</sup> benefit**!



To learn more: Call the number listed on your ID card or visit KemptonGroup.com.



# **KPPFREE™ CASH PRICE AGREEMENTS FAQ**

## FREQUENTLY ASKED QUESTIONS

#### What is KPPFree™?

KPPFree™ is a program that encourages self-funded employers to work directly with medical providers who believe in charging a fair price for high quality care.

Under KPPFree™, you can receive high quality care at an enhanced benefit, often with no out-of-pocket cost.\* To encourage you to use this benefit, reasonable travel expenses are included.

Providers who are part of KPPFree™ are paid quickly, often at 100%.\* They are reimbursed from a simple invoice rather than filing a claim through the PPO network.

## What services are available through KPPFree™?

Medical services available through KPPFree $^{\text{TM}}$  are non-emergency procedures such as surgeries, tests, and diagnostic imaging. The up-front transparent prices for KPPFree $^{\text{TM}}$  services are bundled. This means the price includes all relevant items, such as surgeon, facility, and anesthesia.

## What is a KPPFree™ Cash Price Agreement?

A KPPFree™ Cash Price Agreement enables participants to get the same enhanced KPPFree™ benefit with the medical provider they choose.

If your provider agrees to match, or closely approximate, the *bundled* price of a current KPPFree™ provider for a particular service or procedure, it can be covered under the KPPFree™ benefit.

All services required for the service or procedure are bundled under KPPFree™. These same services must also be included in the Cash Price Agreement.

### Is a KPPFree™ Cash Price Agreement the best option for me?

Cash Price Agreements are consumer-driven. This means that you, as a smart consumer, are responsible for working with your provider(s) independently, and "owning" the process.

The relationship you have with your provider is very important to this process. There is a much higher possibility of success when the patient, you, leads the discussion.

However, this process is not for everyone.

If you are uncomfortable having this discussion with your provider, or you do not want to devote the time to the process, this option is not a good fit for you.

For medical issues that are urgent or time sensitive, we recommend using a current KPPFree™ provider, or your regular plan benefits for care.

Even if a Cash Price Agreement is not the best option for you, the enhanced benefit is still available by choosing a current KPPFree™ provider. You may also choose to use the regular plan benefits available to you.

## Are all providers willing to do a KPPFree™ Cash Price Agreement?

No. Not all providers are willing, or able, to participate in this option.

If your provider is not willing or able to sign a Cash Price Agreement, you still have an enhanced benefit available if you choose to use a current KPPFree™ provider. You may also choose to use the regular plan benefits available to you.

## What is the process?

- Call the Kempton Care Advocates to find out if your medical service is available through the KPPFree™ program and discuss whether a Cash Price Agreement is your best option.
- Talk to your provider about the enhanced benefit available to you. If they are willing to match, or closely approximate, the KPPFree™ bundled price, you can request a Cash Price Agreement to share with them.
- 3. The Kempton Care Advocate will provide you with a Cash Price Agreement to present to your provider for them to sian.
- 4. Once your provider has signed the agreement return it to the Kempton Care Advocate for review.
- After the agreement is reviewed, and our team confirms that all necessary services are included in the bundled price, the Kempton Care Advocate will send an executed copy of the agreement to you.
- Once the process is complete, you may schedule your appointment and your medical services will be covered under the enhanced KPPFree™ benefit!

### **Talking Points**

- "How much will this treatment cost? I would like to know what the total cost will be, not just my out-of-pocket cost."
- "My health plan is self-funded. I want to keep costs in mind when I am making this decision."
- "I have an enhanced benefit that saves me significant money on my out-of-pocket costs."
- "We have the option of working together so that I can still have my out-of-pocket costs reduced or waived, while not having to use a different provider."
- If you are willing to work with me and match the bundled price of a provider who participates in KPPFree™, I get the enhanced benefit, but there are also benefits for you too. Can we discuss this option?"

### **Have Questions?**

For assistance please call our Kempton Care Advocates **using the number on your ID Card**, Monday – Friday 8:00 a.m. - 5:00 p.m. CST.

