DO YOU KNOW...

How to read your insurance card

As you get close to transitioning from St. Jude, it is important to learn to read your health insurance card. This card can be confusing until you learn how to read it. You and your new adult health care team need the information on your card to know how much your insurance company pays, what you pay, and more. This can help you understand your health insurance card.

Identify your information

Every health insurance card should have the patient's name on it. If you have insurance through someone else, such as a parent, you might see that person's name on the card instead. The card might also include other information, such as your home address, but this depends on the insurance company.

Policy number

All health insurance cards should have a policy number. When you get a health insurance policy, that policy has a number. On your card, it is often marked "Policy ID" or "Policy #." The insurance company uses this number to keep track of your medical bills.

Group plan number

If you have health insurance through work, your insurance card probably has a group plan number. The insurance company uses this number to identify your employer's health insurance policy. As an employee, you are covered by that policy. Not all insurance cards have a group plan number.

Insurance company contact information

The back or bottom of your health insurance card usually has contact information for the insurance company, such as a phone number, address, and website. This information is important when you need to check your benefits (what the insurance company pays for) or get other information. For example, you might need to call to check your benefits for a certain treatment, send a letter to your insurance company, or find information on the website.

Coverage amounts, in and out of network, and co-pays

The "coverage amount" tells you how much of your treatment costs the insurance company will pay. This information might be on the front of your insurance card. It is usually listed by percent, such as 10 percent, 25 percent, or 50 percent. You might see several percent amounts listed.
together. For example, if you see 4 different percent amounts, they could be for office visits, specialty care, urgent care, and emergency room care.

In network and out of network

You might see another list with 2 different percent amounts. The first percent, which is normally larger, shows how much the insurance company pays doctors and other health care providers who are considered “in network.” “In network” means that the insurance company has an agreement with this group of providers. The second percent amount is the amount your insurance company pays doctors and other health care providers who are “out of network.” Your insurance company does not have an agreement with providers who are outside the insurance company's network.

You are allowed to see providers who are “out of network,” but you will have to pay them more than you would to a provider who is “in network.” When you see any health care provider, you will have to pay the amount that the insurance company does not cover. To find out if a provider is “in network” contact your insurance company.

Co-pays

Finally, you might see a dollar amount, such as $10 or $25. This is usually the amount of your co-payment, or “co-pay.” A co-pay is a set amount you pay for a certain type of care or medicine. Some health insurance plans do not have co-pays, but many do. If you see several dollar amounts, they might be for different types of care, such as office visits, specialty care, urgent care, and emergency room care. If you see 2 different amounts, you might have different co-pays for doctors in your insurance company's network and outside the network.

If you do not see your coverage amounts and co-pays on your health insurance card, call your insurance company (use the number on the back of your card). Ask what your coverage amounts and co-pays are, and find out if you have different amounts and co-pays for different doctors and other health care providers.

Prescription coverage

Your health insurance company might pay for some or all the cost of prescription medicines. If so, you might see an Rx symbol on your health insurance card. But not all cards have this symbol, even if your health insurance pays for prescriptions. Look at your own card for an Rx symbol. Sometimes, the Rx symbol has dollar or percent amounts next to it, showing what you or your insurance company will pay for prescriptions.

If you are not sure whether your health insurance pays for prescriptions or how much it pays, call the number on your insurance card to find out.

Questions? Call your insurance company

If your health insurance card has a symbol or information you do not understand, call the customer service number on the card. Your insurance company can answer any questions you have. Patients may also talk to their St. Jude social worker for help with getting insurance or for directions on how to access insurance.
1. Policy number
2. Group number
3. Co-pay amounts
4. Coinsurance amounts (for prescriptions Rx: generic drugs are $10, brand drugs on the approved list are $20, and drugs off the approved list are $40)
5. In-network (insurance pays 90 percent, card holder pays 10 percent)
6. Out-of-network (insurance pays 80 percent, card holder pays 20 percent)

This document is not intended to take the place of the care and attention of your personal physician or other professional medical services. Our aim is to promote active participation in your care and treatment by providing information and education. Questions about individual health concerns or specific treatment options should be discussed with your physician.

St. Jude complies with health care-related federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATTENTION: If you speak another language, assistance services, free of charge, are available to you. Call 1-866-278-5833 (TTY: 1-901-595-1040).


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