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ELIGIBILITY

Who is eligible for coverage through Optum?

Compulsory members, such as:

- Students

A student is covered if he/she is a full-time student and receives financial support from the State Educational Loan Fund (Lånekassen) in Norway. Students without financial support from the State Educational Loan Fund have the same rights as mentioned above, when studying abroad for a maximum of one year. It is presupposed that they are full-time students at an educational center abroad.

- Consulates & Embassy employees
- Military staff
- Pensioners
- Maritime
- Voluntary Members, Subject to approval from HELFO

New members may go directly to HELFO's website to register. New members will need to register on the website, and if the member has health rights, HELFO will register this information in the system and will notify Optum of the enrollment once per week. This will mainly apply for members that have not been in contact with HELFO before they contact Optum to get a card.

The link for non-students is: <https://helsenorge.no/bo-i-utlandet/utsendte-arbeidstakere-utenfor-eu-eos>. You will be able to find the form under "Bekreftelse på helserettigheter".

The link for students is: <https://helsenorge.no/bo-i-utlandet/student-utenfor-eu-eos> (mainly for frivillig students). Lånekasse-students are registered automatically when HELFO receives the info directly from Lånekassen.

Insurance cards

Insurance cards are sent by Optum. Cards are automatically sent to Embassy staff and military members upon receipt of completed enrollment form. All other members must contact Optum directly by phone or email (helfo@equian.com) to advise of your name, date of birth, 11-digit Norwegian personal number, and US address. Cards cannot be mailed to Norway.

Will each family member receive an insurance card?

Yes.

Coverage for dependents

Any direct child of a member is automatically covered through Optum/HELFO upon receipt of the completed enrollment form. They will be covered under the main member. Spouse or dependents with common child is compulsory members if they are provided for and are Norwegian citizens. All newborns must be registered. Please contact HELFO directly or visit HELFO's website for enrollment. See the Eligibility guidelines above.

Termination of coverage for students

Generally, you have full coverage until the first Sunday in the month following your last exam. After this you have reduced coverage through HELFO directly. This means that you must pay all charges after this period yourself and submit to HELFO for consideration. However, if you start working in the USA, you are no longer covered but can apply for voluntary membership. You must contact HELFO directly for a voluntary membership.

Am I covered with Optum during my Optional Practical Training (OPT)

No. As soon as you start working, you are no longer covered with Optum/HELFO. However, you can apply for voluntary membership in which you will be covered through HELFO directly.

How do I apply for voluntary membership?

Go to www.HELFO.no and find detailed information about voluntary membership. This is to be sent directly to HELFO. For further information contact HELFO directly.

If I am a voluntary member, will I be covered through Optum?

Maybe. HELFO will determine if voluntary members may be covered through Optum.

POLICY INFORMATION

What treatment or treatment categories are not covered?

Acupuncture, Aromatherapy, Homeopathy, Naprapath, Optician, Osteopath, Cosmetic treatment, Regular dental work/School dental service, Routine check-ups/preventative care, Infant welfare/well baby exams, Vaccinations/immunizations, Experimental treatment, Medical certificates/medical records. Please note that this list is not complete.

What is my deductible?

The deductible amount changes every year and is set by HELFO. The deductible is approximately \$210.00 USD. This is taken in 25% increments after any contractual savings is applied. Optum will pay the provider, minus the deductible. The provider will then bill the deductible amount to the member. This is the member's responsibility and should be paid directly to the provider. Children under 16 years of age have no deductible.

Do I have to pay co-insurance?

No, unless specifically stated otherwise.

Are pre-existing conditions covered?

Yes.

Routine visits

Not covered, except annual well woman examination (including pap smear and mammogram).

Well baby care

Not covered.

Vaccinations

Most vaccinations not covered.

Well baby care and vaccinations are covered in Norway, why is it not covered while I am in the US?

When you travel abroad, the coverage is not always the same as if you were in Norway. Well baby care and vaccinations are not governed by "trygdeloven" when you travel abroad, and are therefore not covered. As an example, schooling is free in Norway. However, when you travel abroad you will no longer have this right. The same is for well-baby care and vaccinations.

Mammogram

Covered. 25% deductible will apply if not already met.

OB/GYN

Covered. 25% deductible will apply if not already met.

Maternity

Covered. No deductible.

Abortion

Covered. No deductible.

Infertility treatment

All bills must be paid by the member and submitted directly to HELFO for possible reimbursement.

Dental

Optum is approved to process dental bills for the surgical extraction of impacted wisdom teeth only. Gum disease (periodontal disease) might be considered. Some other oral surgical treatments may also be considered. We must receive an itemized bill, along with x-rays.

Treatment of tooth decay and cleaning is not covered. The member must pay for dental treatment and must submit an itemized bill directly to HELFO for possible reimbursement. You can find more information on HELFO's website: <https://helsenorge.no/bo-i-utlandet/membership-of-equian-for-employees-and-students-in-the-usa>.

Physical Therapy

A referral from a Medical Doctor is needed. 24 sessions each six months period is covered and a total of 48 sessions a year. If you need more PT than this, please have the treating physician send us medical records to approve further sessions. Physical therapy is covered at 75%. If physical therapy follows surgery therapy is covered at 100% for six months.

Occupational Therapy

Not covered.

Speech Therapy

Coverage is available. We must receive a copy of the medical notes, along with a referral from the treating physician to be pre-approved by HELFO.

Psychotherapy

Psychotherapy must be performed by a Psychologist (PhD) or Psychiatrist (MD). If you are seeing a PhD, a referral from an MD is needed. Please email or fax to our office.

Chiropractic treatment

Limited coverage. Please contact our office for details.

Prescription medication

Please pay prescription medication up front and submit the original receipt to Optum for consideration. The receipt must include the name of the doctor who prescribed the medication, the date it was prescribed, the name of the drug, and the total charges.

Only Blue Card prescriptions are covered.

Blue Card prescriptions are drugs for chronic conditions (ex. Diabetes, heart, depression etc.). A deductible of 39% is applied towards covered medications. After the deductible is met, Blue card is covered at 100%. Once the medication is approved by HELFO, you can purchase refills with your pharmacy card.

If you have questions whether the drug you are using is a blue card or white card prescription, please contact our office.

Supplies

Generally not covered. Contact our office for details.

Durable Medical Equipment

Generally not covered. However, please forward medical records and/or doctor's prescription to our office for consideration.

Vision

Coverage is available for the eye exam. However; glasses or contact lenses are not covered. Exams by an optician are not covered. HELFO covers exams done by Ophthalmologists.

Inpatient Hospital

Necessary inpatient services in hospital in a semi-private room are covered in full, including psychiatric hospitals and maternity clinics. Necessary laboratory tests, x-rays, pathology, anesthesiology, etc. relating to the hospitalization dates are also covered in full.

Surgery

If your medical doctor recommends a surgery, please contact our office for approval.

Ambulance

Covered. No deductible.

Experimental treatment

Not covered.

Death

Necessary funeral expenses abroad are covered in full. Transportation expenses of cinerary urn or bier to Norway are also covered in full.

Repatriation/medical evacuation

May be considered on a case by case basis; if medically necessary and approved by the Norwegian government then the reasonable charges are covered. Medical evacuation is never requested or required by Optum/HELFO.

Lifetime/per illness maximum?

Unlimited

CLAIMS PROCESSING

While I am in the US, how will my claims be handled?

HELFO will administer services and claims in the US through Optum.

How do I find a doctor?

Contact us for help with finding a provider.

What is a Preferred Provider (PPO)?

A PPO is a group of hospitals, physicians and other health care providers who agree to provide health care services at pre-negotiated rates to plan participants. These providers must all meet strict credentialing and re-credentialing requirements in order to be admitted and stay in the PPO Network.

Why would I want to look for a PPO provider first?

Your per time deductible will be less. Also, because we are in network with these providers, you should not have any problems with them arranging direct billing with our office.

Do I need to pay at the time of service?

Optum has billing arrangements with many medical providers. When arranging care with the medical provider, please present your insurance card. This card details the information necessary to do direct billing. If the provider does not accept the insurance card, please have them call us directly at 800-962-6831.

The provider I contacted will not accept my insurance card, what do I do?

It is very likely that the provider has not heard of Optum before. However, when presenting your insurance card, they will see the Aetna name and logo. If the provider is affiliated with Aetna, they must bill us directly. However, if the provider is not affiliated with Aetna, they most likely will not accept your insurance because they think you do not have out-of-network benefits. This is incorrect. Therefore, if you have any problems with the provider not accepting your insurance, please have the provider contact our office so we can verify your coverage and arrange for billing.

Where do I send a payment for my deductible?

Upon completion of processing your claim, we will send a check and an EOB ("Explanation of Benefits") to the provider. Optum will pay the provider, minus the deductible. The provider will then bill the deductible amount to the member. This is the member's responsibility and should be paid directly to the provider. Children under 16 years of age have no deductible.

I keep receiving bills in the mail, what do I do?

The billing practices in the US are quite different, thus, we would like to advise you that it is not uncommon for the hospital and physicians to bill you at the same time they bill our office. As well, there also may be medical providers that have not sent the bills to our office, expecting that you will forward them to us. In case you do receive bills from the hospital or doctor's office, please forward them to our office together with a copy of your insurance card. However, please note that the bill may also be for your deductible, and therefore be your responsibility. If you are unsure if this is something you need to pay or not, please contact our office for information.

What type of information do you need to be able to reimburse me for medical expenses?

We need an original itemized bill that indicates the following:

- Provider's name, address, and Federal tax identification number
- Date of service
- Charges
- Diagnosis (ICD-10 codes)
- Procedures (CPT codes)

For prescription we need the original prescription receipt that includes the patient's name, the name of the drug, the name of the doctor who prescribed it, the date it was filled, and the total charges.

Where do I submit claims for reimbursement?

You can email them to helfo@equian.com. You can fax them to 317-806-2033. You can mail them to our physical address: Optum, 5975 Castle Creek Parkway, Suite 100, Indianapolis, IN 46250. However, for claim submission by providers, they must send the bill to the Aetna address listed on the back of the card: Aetna, PO Box 981543, El Paso, TX 79998-1543.

I do not agree with the decision you have made on my claim, what do I do?

If you do not agree with the decision of how your claim was processed, we encourage you to send an appeal or complaint. You may appeal against any decision you disagree with. The appeal must be presented within six weeks from the day you received notification of the decision. All appeals must be submitted directly to HELFO. You can get the appeal process from HELFO's website: www.HELFO.no or www.helsenorge.no.

How are claims payments made?

Normal refund payments are made by check.

What exchange rate will be used?

The rate is set by HELFO and changes yearly.

What can I expect for turnaround time for claims payment?

From the time a clean claim (A claim where all the information is available for processing. If we do not have all the required information, we will request this either from you or directly from the provider.) is received, the average turnaround time is eight days. From the time we have processed your claim, it generally takes 7-10 days before a check/EOB is sent out from our office.

Where will my claim reimbursement and explanation of benefits (EOB) be mailed?

Checks and EOBs will be mailed directly to the address that you have informed us of. Therefore, you must ensure that Optum has your correct address.

Are claim submissions acknowledged?

No.

Can I see my claim reimbursement on the website?

Currently, you are not able to see your claim reimbursement on our website.

OTHER

What if I have other insurance?

If there is another possible liable party (other insurance), in order to expedite the processing of your claim, please advise our office of any known relevant information. If you have insurance with another US company, you may choose which company you want to be the primary payor. However, if your other insurance is through Norway, such as Gjensidige/Gouda/Ansa, HELFO/Optum will be your primary insurance. For those that also are covered by Tricare, Tricare is always secondary to HELFO.

I need to waive my school insurance, what do I do?

Your university may ask you to complete a form ensuring that your coverage meets the insurance requirements defined by the university. If required, please fax or email (helfo@equian.com) that form to our office to complete the specifications of your policy. We also have standardized letters about your policy coverage that we can send to your university. This may prevent demands from your university to purchase additional coverage.

I have old claims I would like to be reimbursed for; can I submit these to you?

We must receive the first notification of a case within six months after the treatment for it to be covered. Please note that even though you might not have notified us, we might have received bills or correspondence from the provider directly regarding your case. Therefore, we recommend that you send all claims to us so we can review for coverage.

When do I need a referral?

Your insurance policy requires you to have a referral from a Medical Doctor for physical therapy and for psychotherapy (see details above). If you are seeing a specialist other than what is noted above, your insurance policy does not require you to have a referral from a Medical Doctor. However, please note that the specialist may be the ones that require that you have a referral.

I have received an injury questionnaire, why?

If the claim we receive indicates that you were treated for an injury, we will send you an injury questionnaire for you to fill out. Since we are secondary to all other liable parties, we want to investigate possible other insurance regarding your injury. Please note that we are not trying to put blame on anyone who may have caused the injury, but simply to find out if other insurance is available.



About Optum Maritime & International Solutions

Optum Maritime & International Solutions collaborates with clients to lower costs while improving health outcomes for the members we serve. Our comprehensive pharmacy, ancillary and medical services combine data, analytics, and extensive clinical expertise with innovative technology to ensure members receive safe, efficacious and cost-effective care throughout the lifecycle of the claim. For more information, email us at expectmore@optum.com.

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