



TOGETHER,
WE'RE LEADING
THE WAY TO
BETTER
HEALTHCARE.


HOORAYHEALTH
AN ASSURANCE COMPANY.

PROVIDER FAQs
Frequently asked questions about
Hooray Health for Providers

www.hoorayhealthcare.com/providerportal

FAQs

PLEASE NOTE:

Hooray Health will update this document on a regular basis. If you have any questions that are not answered by this document or the Provider Manual, please go to www.hoorayhealthcare.com/providerportal to submit an inquiry. Thank you for being a part of the HH network.

What is the legal information about Hooray Health?

Hooray Health Holdings, Inc. was incorporated in the State of Delaware and Hooray Health, LLC is a Limited Liability Corporation in the State of Texas. Hooray Health, LLC is the insurance agency entity for Hooray Health Holdings, Inc.

Define Hooray Health.

Hooray Health is an assurance company that provides limited benefit plans. Additionally, Hooray Health is an urgent care and retail clinic national provider network built for the Hooray Health individual and group limited medical insurance plans.

Who is the TPA (third party administrator)?

Hooray Health works with multiple Third-Party Administrators. Below is a list of the current TPAs. Additional information can be found in the Provider Manual available on the Provider Portal:

- Administrative Concepts, Inc. (ACI) is the TPA and Axis Insurance is the underwriter

How many years has Hooray Health been in business?

Hooray Health has been in the limited benefit business since 2017.

Are there states in which Hooray Health has restrictions?

Please contact Hooray Health regarding a current listing of state information, as the list is updated frequently. Please contact providers@hoorayhealthcare.com.

Does Hooray Health have an insurance license?

The plans Hooray Health offers are group products. There are several insurance companies underwriting our plans. These insurance companies require that the Agency, Hooray Health LLC maintain a resident license only. The Resident Agency license is available upon request.

How many providers are in the Hooray Health network?

Hooray Health has over 3,500 locations nationwide and can be found via our website or mobile app.

Under traditional insurance coverage, patients will ask as to why certain charges are not paid by the insurance company.

We refer the patients to their insurance company. Should patients refer any of these types of questions to Hooray Health's office or to the appropriate TPA? Patients should refer questions about their coverage to the TPA that who processed the claims.

FAQs cont.

Can Hooray Health provide the names of any people that process the claims?

The provider manual is the primary source for any questions regarding claims processing. Any questions can be directed to the appropriate TPA/Insurance Company.

What is Hooray Health's volume and how many additional patients does Hooray Health anticipate in 2020/2021?

Hooray Health sells to employers as alternative and supplement coverage focused on urgent cares, as the primary source of care. Hooray Health works with these employers and brokers and sells multiple levels of plans. Our primary market is part-time and hourly workers for ultra-large national employers in the retail, restaurant and hospitality marketplace. Our primary market niche is for those groups without healthcare coverage and are needing access to basic healthcare. Hooray Health's in-network contracted urgent cares and retail clinic locations facilitate Hooray Health's ability to grow the business that drives volume.

Hooray Health's volumes are anticipated to increase in various ways based on our success in other markets with our growth strategy. As noted above, Hooray Health works with employers in the retail, restaurant and hospitality marketplace who have no or very limited insurance options to offer their employees. Hooray Health has been and continues to be a perfect fit for this market.

As the number of urgent care and retail clinics continue to grow, Hooray Health can continue to drive member growth. Hooray Health has gained traction with major employers that appreciate Hooray Health's national footprint of urgent care and retail clinic locations, alongside Hooray Health's mobile app that guides them to contracted providers. Hooray Health continues to build the national footprint to give our members access to basic healthcare coverage.

Will you be providing a listing of current employers?

At this time, Hooray Health will not be providing a list of employers. Hooray Health uses the insurance cards and the eligibility information as identification of coverage under the Hooray Health Plan.

If a patient is seen in the urgent care or retail clinic location and is transferred to a hospital, does Hooray Health still cover the urgent care consultation?

Yes, the consultation completed in any in-network Hooray Health location will be paid to the specified TIN and will be based the claim/CPT codes submitted.

Why does Hooray Health only cover urgent care and are there any plans to expand the coverage?

Hooray Health found that there was a need for patients to have access to basic healthcare needs. Hooray Health was created to provide urgent care coverage to consumers and employers in an easy to use, consumer centric manner that helps pay the bills, thereby closing the loop regarding access to care through urgent care facilities at an affordable cost without the provider having to chase down deductibles. Patients can use their Hooray Health mobile app to find the nearest urgent care or retail clinic to get their basic healthcare needs provided at an in-network urgent care or retail clinic without having to deal with high deductible plans and balance bills. Contracted entities are updated on the Hooray Health website. Hooray Health's goal is to offer a low-cost, practical Health plan that is supported by technology and a robust provider network. Regarding expansion, Hooray Health has contracted for services related to labs, imaging, physical therapy, etc. in addition to contracting with urgent care locations.

FAQs cont.

Does Hooray Health have a claims submissions procedure for claims not approved or a claims appeal process?

Hooray Health has a detailed provider manual which outlines the claims and claims appeal process.

How does Hooray Health choose locations?

Hooray Health continues to expand its locations based on multiple factors including growth and expansion, as well as specific employer requests.

What is the advantage for us to become in network with Hooray Health?

There are many reasons: Hooray Health's patients have no annual deductibles, \$25 co-pays, with fast payment – 7 to 10 business days after receiving a clean claim. Our contracts are simple and easy to understand, totaling only nine pages. Providers are pre-credentialed, saving money and time on networks that require credentialing. Patients have access to a 24/7 concierge service comprised of EMTs and Paramedics who guide the patient to the nearest contracted location, generates a triage report, faxes your location the triage report for your records and in some instances, even calls to let you know the patient is coming. Hooray Health patients access our mobile app to obtain directions to your facility. In addition, for your facility, Hooray Health provides free marketing of your location on our website, mobile app, along with a press release upon your signing.

What is the average time for a claim to be processed and a check to be sent? Is Hooray Health considering electronic deposit?

Hooray Health's average claims are paid within 7 to 10 business days of a receiving a clean claim. Hooray Health's electronic processing is outlined in the Hooray Health provider manual.

Is there any way to negotiate the pricing?

Hooray Health's plan is a fixed indemnity coverage. Our plan is competitive in the Health insurance market. All Hooray Health's pricing in each of our in-network agreements is the same. Please refer to your executed agreement.

What is a fixed indemnity insurance plan?

Fixed indemnity health insurance is a type of medical insurance that pays a pre-determined amount on a per-period or per-incident basis, regardless of the total charges incurred.

Why is there a limit on the number of visits?

With Hooray Health's plan being a fixed indemnity plan, members are limited to 1 Wellness visit, and 5 combined Level 1 and Level 2 visits.

How often are rates updated?

Hooray Health's rates for Wellness, Level 1 and Level 2 visits remain the same. Hooray Health's Usual & Customary fees adjust semi-annually without notice, based on FairHealth.org.

Will the patient be responsible for the list of non-covered services?

Yes. There are Plan Limitations in the Provider Portal that includes a list of non-covered services for all plans. Please be sure to check the back of the patient's ID card to determine which plan they fall under.

FAQs cont.

Does Hooray Health have a listing of limitations and exclusions?

Yes, Hooray Health has a list of limitations and exclusions available on its provider portal.

How does Hooray Health determine all the limitations listed – there seems to be a lot?

The limitations are specific to the insurance company certificate and are available on the Provider Portal.

Is there a form that needs to be completed by the member for accident coverage?

There are no additional forms required for accident coverage for claims to be adjudicated and paid. You will submit a clean claim as you would for any other visit.

How can a provider verify eligibility of a Hooray Health member?

Hooray Health has multiple options for determining eligibility. Please refer to the Provider Manual for all eligibility information.

How can a provider identify the number of visits used by a patient, or their maximum accident coverage amount?

Please refer to the back of the patient's insurance card to ensure you have the correct TPA/ Insurance Company. They will need to be contacted to determine this. Detail of this process can also be found in the Provider Manual.

Should I file claims in our Group Name or under the individual Provider's name?

Either will work. As long as the entities Tax ID # is included on the claim, it will be paid accordingly.

What additional benefits outside of the Urgent Care & Retail Clinic do Hooray Health's Members have?

While Hooray Health plans are limited, Hooray Health patients have access to additional healthcare. Some of the options include prescription discounts coverage through the Hooray Health mobile app, access to discount imaging such as discounted MRI and CT scans; lab discounts including Quest and LabCorp; and, a network of physical therapy locations.

How does Hooray Health market their product? Hooray Health markets their product in several ways. The top three ways include:

1. Website, mobile app and social media – Hooray Health will list your location on our website, on the mobile app and through social media. This allows for marketing options for in network locations.
2. Create relationships with brokers and agents that offers Hooray Health to employers.
3. Internal sales team that markets directly to employers.

Does Hooray Health pay for telemedicine visits through my Urgent Care?

We realize that the COVID-19 Pandemic brings telemedicine to the forefront in respect to access to healthcare. In short, Hooray Health does not pay for telemedicine visits through individual Urgent Care clinics. Hooray Health has its own telemedicine product and we ask that patients utilize that system first. On the back of each members identification card, there is information about telemedicine and how to access that. If a patient does present themselves to your telemedicine, we will ask the patient to pay for that out of their pocket.

THANK YOU FOR BEING
A PART OF THE HOORAY
HEALTH FAMILY.

WE LOOK FORWARD TO
GROWING WITH YOU.

HOORAY HEALTH

5015 Addison Circle, STE 508

Addison, TX 75001

1-855-545-4568

www.hoorayhealthcare.com/providerportal