Medical Savings Accounts, or MSAs, are a type of Medicare Advantage plan.

Lasso Healthcare MSA combines health coverage with a special medical savings account. We deposit money from Medicare into the member’s savings account. The member decides what health services to spend it on.

CMS designed MSA plans to be consumer-driven, with open clinical access to all Medicare providers and reimbursement just like Original Medicare.

Lasso Healthcare is the nation’s MSA leader, offering MSAs in more locations and to more members than any other carrier.
Frequently asked questions

We do not contract with Lasso Healthcare. Can we submit claims for reimbursement?

Yes! CMS prohibits us from restricting clinical access, so we have no "network" or "contracted providers" like other Medicare Advantage plans. Thousands of providers already accept the Lasso Healthcare MSA, including some of the largest and most renowned systems. Claims submission does not require a contract and follows the same process used to submit out-of-network PPO claims.

We’ve had issues with non-paying patients in the past. What if the patient doesn’t pay?

We want you to get paid! If you are having difficulty receiving payment from your patient/our member, please contact our Provider Service team.

How can I support MSA plan members to better manage their health?

Help your patient focus services on preventive versus corrective. Establish an annual care plan and see your patient periodically. Consider sharing clinical information via platforms such as OpenNotes.org. Finally, put yourself in your patient’s shoes to understand how challenging navigating our overall health system can be; become an informed health consumer yourself with tools such as ChoosingWisely.org.

Get paid in 3 easy steps

- **Submit claim to Lasso Healthcare via clearinghouse information on the patient’s plan ID card.**
- **We return Medicare-allowable pricing to you, along with any payment due from us and any patient liability amount.**
- **Bill the patient directly for any balance due. The patient chooses to pay with their available MSA funds or out-of-pocket.**

MSA patient not paying their amount due? Contact us and we’ll help you get paid.

What does CMS say?

- Medicare beneficiaries with an MSA may access any Medicare provider. Insurance companies offering MSA Plans cannot limit an MSA member’s provider choice.
- Insurance companies offering Medicare MSA Plans are required to pay as Medicare pays.
- If a provider accepts assignment as Medicare-participating, reimbursement is the lesser of billed charges or 100% Medicare allowable amount.
- If a provider is non Medicare-participating, reimbursement is 95% of the Medicare allowable amount with balance billing of the member (where allowed by state law) allowed up to 15% of the non-participating Medicare allowable amount.