



Access to Care

Checklist to Getting a Second Medical Opinion

Wanting to get a second medical opinion is common, especially if you have a serious medical condition? A second medical opinion helps you make informed decisions about your health care, ensures you receive the most accurate diagnosis and appropriate treatment options available to you. You always have the right to get another opinion about your medical care. You can even get a third or fourth opinion if that is important to you.

Why would you consider getting a second medical opinion?

- To make sure that you have the correct diagnosis.
- If the diagnosis is aggressive, rare, unusual, or complex.
- If there is uncertainty about the type or stage of a medical condition.
- If a health insurance plan requires a patient to get a second opinion before starting treatment.
- If the medical condition is not responding to its current treatment.
- If the treatment options for a diagnosis may have serious side effects.
- If another doctor may be more familiar with the latest treatment options.
- If another perspective may result in a more comprehensive approach to treatment or introduce you to an opportunity to participate in a clinical trial.
- Peace of mind.

How do I get a second medical opinion?

- Talk to your current doctor about why you would like a second medical opinion. Your doctor is unlikely to be surprised or offended because getting a second medical opinion is very common. Some doctors may even recommend that you get a second medical opinion. Ask your doctor for referrals for another doctor or specialist who can provide a second medical opinion.
- Contact patient advocacy organizations that specialize in your medical condition. They may have recommendations on how to find another doctor or specialist who can provide a second medical opinion.
- Contact your insurance company.
 - Ask what their process is to get a second medical opinion. For example, do you need to get approval from the insurance company, which is called a pre-authorization?
 - Confirm that the referred doctors and specialists are in-network for your health insurance plan.
 - Request a list of in-network providers if you have not found a doctor or specialist who can provide a second medical opinion.
 - If there are no in-network providers that can provide a second medical opinion, you can ask your insurance company to make an exception. This is sometimes called a “network gap exception.” This means that they will cover a second medical opinion from a provider who is out-of-network for your health insurance plan.

Checklist to Getting a Second Opinion

- Request a copy of your medical records from your current health care team and provide them to the doctor or specialist who is giving you the second medical opinion. Records may include:
 - Medical history
 - Imaging tests
 - Biopsy slides
 - Pathology reports
 - Discharge summaries (if you have received inpatient care)
 - List of all drugs taken, as well as the dosage and time at which they were taken
 - A summary of the treatment plan(s) that has been given to you

If you have any trouble accessing your medical records, read our Quick Guide to Accessing Medical records: TriageHealth.org/Quick-Guides/MedicalRecords.

- Before attending your second opinion appointment, write a list of any questions you have. You may want to ask:
 - How did you arrive at your conclusion?
 - What were the most important factors you considered?
 - How does this compare with other cases you've seen?

Will my health insurance cover a second medical opinion?

Generally, most health insurance plans will cover a second opinion from an in-network provider. Some health insurance plans may even require a second opinion before beginning treatment. However, coverage does depend on the type of health insurance that you have:

- **Medicaid:** Will cover a second opinion for medically necessary surgery that is not an emergency.
- **Medicare:** Will cover a second opinion for medically necessary surgery that is not an emergency. Medicare will also help pay for a third opinion if the first and second opinions are different.
- **Private insurance (e.g., employer-sponsored or Marketplace plans):** Will generally cover a second opinion from an in-network provider. If there is no in-network provider to provide a second opinion, you may request a network gap exception from your insurance company to see an out-of-network provider. It will be determined by your insurance company on a case-by-case basis. If your request is denied, you can appeal that decision. For information about appeals, read our Quick Guide to Appeals for Employer-Sponsored & Individual Health Insurance: TriageHealth.org/Quick-Guides/Appeals.
- **TRICARE:** You may be able to access a second opinion, if you go to your Primary Care Manager (PCM) and explain your situation and any questions you may have about the first specialist's suggested care. Then, ask your PCM to coordinate a referral to another specialist and request a referral from your regional contractor, if necessary.

For more information about navigating health insurance, visit: TriageHealth.org/Health-Insurance.

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