



MEDICAL BILLS: COMPREHENSION, SCRUTINY AND CORRECTION

Question: I see a primary doctor and two specialists. I get paperwork from both the doctors' offices and my insurance company. What should I do with it all?

Answer: You are not alone. Each medical payer (insurance, HMO, Medicare) and provider (doctor, hospital, nursing home) is required by law to communicate with you about your condition, treatment, coverage and payments. However, how they communicate with you is often confusing, and the bills may contain costly errors and overcharges.

For that reason, it is important that when you receive any bill or summary from an insurer or provider, you review it carefully to make sure they billed the right person for the right services at the right amount. For example, Medicare will send an explanation of benefits (EOB) that shows the patient's name, provider's name, date of service, service provided, what Medicare paid and what they say you owe. It may also contain billing codes, used by all providers and insurance companies, that are internal shorthand in the medical world. Patients are not expected to understand these codes—hence the possibility of billing errors. If you

see multiple doctors, make sure the EOBs are correct. If you suspect an error, get on the phone. It doesn't matter if you call the provider or the payer first.

If you do not have the time or wherewithal or if you manage care for someone else and think a mistake is causing an erroneous medical bill, you can hire a medical billing advocate. Some are fee-for-service, and some work on contingency, getting paid a portion of the amount they recover. This is an emerging field, with Medical Billing Advocates of America (a for-profit company) leading the way. You can read more about their services and order educational materials at <http://www.billadvocates.com> or call them at (540) 904-5872.

If you have Medicare billing questions, you can call 1-800-MEDICARE, your local HICAP office (Health Insurance Counseling and Advocacy Program) or SHIP office (State Health Insurance Assistance Program). Find your SHIP office at <https://shipnpr.shiptalk.org/shipprofile.aspx>.

Sources: "Understanding Your Medical Bill": www.FamilyDoctor.org. <http://www.consumerreports.org/cro/money/personal-investing/check-medical-bills-for-errors/overview/index.htm>. <http://www.oprah.com/omagazine/How-to-Save-Money-on-Medical-Bills>

JOKE OF THE MONTH

**Doctor: I can do nothing for your sickness.
It is hereditary.**

Patient: Then send the bill to my father.

— *A Joke a Day Keeps the Doctor Away*, Bob Phillips

Laughter is known to boost the immune system, lower blood pressure, burn calories and release pleasure-inducing chemicals in the brain.

Go Green!

Receive Social Services Corner by email.

Call (888) 994-3863, ext. 2370, or email info@wrmail.org.

Do you or does someone you know need our assistance? Call toll-free (888) 994-3863 or visit www.wrpioneers.org to find out more about our assistance programs.



AN OUNCE OF PREVENTION IS FREE FOR MEDICARE BENEFICIARIES



Last month we wrote about free mammograms under Medicare. We also uncovered a long list of covered preventive services. Medicare beneficiaries should understand how to access these for free and understand when a charge may be applied.

First, determine what preventive appointment you need. For example, if you haven't had a colorectal exam in at least five years and you are over age 65, you might want to start there, as colon cancer is often highly treatable if caught early.

Next, you want to find a Medicare provider in your area (www.medicare.gov/find-a-doctor/provider-search.aspx). In order to get the preventive service at no cost, you need to find a provider who accepts Medicare assignment, meaning they accept what Medicare pays as payment in full and there will be no co-pay. If you have a Medicare Advantage Plan, they must offer these same benefits through an in-network

doctor, clinic or lab. If you choose to go out of network or to a provider who does not accept assignment, expect a co-pay.

Sometimes a test result requires further exploration. This is when a co-pay or other charges may creep up. It is your right as a patient to ask if there will be an additional charge prior to *any* procedure. Doctors usually don't handle billing, so he or she won't know. So take the time to call your insurance company. The phone number is usually on the back of the card, or the doctor's office should have that information. Avoid billing surprises!

Finally, ask questions when you book an call to make an appointment. Tell the office that you want the Medicare-covered preventive service without any co-pay. To find out which services are covered, call (800) MEDICARE or go to <http://www.medicare.gov/coverage/preventive-and-screening-services.html> for a searchable database and list of covered preventive services. Practicing preventive health care is good for your health and your wallet.

You can read about 2012 preventive services and download a printable brochure at <http://www.ama-assn.org/ama/pub/news/news/2012-01-26-ama-aarp-medicare-preventive-services-brochure.page>.

NEW ADDITIONS TO THE MPPAF'S NATIONAL RESOURCE DIRECTORY

www.assisted-living-directory.com: This website informs consumers, through video instructions, about how to visit their state's government website to research licensed assisted living facilities and other senior care settings. It is important to visit a state's government website because all state-regulated private-pay and low-income assisted living facilities are listed with a description of the services they provide as well as inspection and citation histories. This website also provides access to an assisted living directory and a free senior housing advisor.

QUOTE OF THE MONTH

“Both parties have their good times and bad times at different times. Good when they are out. Bad when they are in.”

—Will Rogers



To view our entire National Resource Directory, please visit www.wrpioneers.org.