

**G**etting your medical insurance to pay the bills for your treatments can be a challenge at any time. Health insurance plans are complex and use specialized language and procedures. If you are also coping

call your insurance company or health-care provider and ask questions. Their errors can be costly to you.

Don't pay for office visits with cash or a credit card if you expect insurance will cover them. Wait until your

may be in-network, but individual physicians may not. Use network retail pharmacies and mail order prescription plans for your medications.

If particular claims for services and items are not covered or not fully covered by your insurance, call and ask why. Mistakes are common. Ask your insurance representative what needs to be done to re-process or appeal the claim. Don't give up if your claim is denied repeatedly. Review your plan booklet regarding the appeal process and keep calling the plan administrator. Seek the help of a professional if you are uncertain how to proceed.

Document your phone conversations and keep copies of anything you send or receive. Keep records, with dates, of who you talked to and what they said. This makes follow-up calls easier. This is also important if providers file insurance claims beyond the time period set by your insurance. You may be able to have late bills written off if you gave your provider your insurance information and they failed to file with your insurance plan on time.

Review hospital bills for accuracy. You're entitled to understand what they are asking you to pay for. Request an itemized bill of your charges. Check for duplicate charges, procedures or items not provided, miscellaneous charges without explanation, or other confusing items. Errors happen. Some insurance plans offer cash incentives to you for finding errors in your hos-



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pital bills. An experienced professional can also help you audit your hospital bills.

These are just a few ways to help you navigate the medical insurance system. Remember that, as the customer, you deserve satisfaction. You can succeed with persistence, patience, and assistance.

**Editor's Note:** Myrna L. Cortez, MSIR, is a medical insurance patient advocate and president of Evanston, Illinois-based ProMediClaim, Inc. She has over 20 years experience helping individuals and families navigate and resolve medical claims issues. Visit [www.promediclaim.com](http://www.promediclaim.com) or call toll-free (888) 777-8092 for more information. ■

## How to Get Your Medical Plan to Work for You

by Myrna L. Cortez, MSIR

**"Remember that, as the customer, you deserve satisfaction.**

**"You can succeed with persistence, patience, and assistance."**

with a serious medical condition, dealing with medical claims issues may seem overwhelming. The following suggestions will help you navigate the medical insurance maze more easily.

Most importantly, ask for help from a family member, trusted friend, or medical claims professional. Look for someone who is persevering, organized, resourceful and advocates for you.

Be an informed consumer. Learn everything about your benefit plan. Read your plan booklet, especially the sections on exclusions. If you don't understand something, call your insurance company, your employer's benefits representative, your doctor, your hospital or whoever sent the material, and ask questions. Don't be intimidated by what you don't know. Be patient and persistent. Take notes. Keep records. Ask for help and keep asking until you get the answers you need.

Pay only what you owe. Don't pay your bills as soon as you get them. Review the Explanation of Benefits statements your insurance company sends you, and compare them to your medical bills. Do the amounts match? Do you understand the charges? If not,

insurance pays and then pay any difference. Often when you pay up front, you pay more because providers are required to apply insurance company discounts when they bill. If your provider doesn't issue automatic refunds, you may never know if you've overpaid and so you will lose money.

Don't panic if you get a collection notice, or let it scare you into writing a check for money you don't owe. Many notices are sent in error. Call the agency and request they place your account on hold for 30 to 60 days and send you an itemized bill. When you receive the itemized bill, call your insurance company to ask if they've paid it. If not, send the bill to your insurance company and let the collection agency know. If you do owe the amount, negotiate for a payment schedule you can afford.

To save money, use your "in-network" benefits as much as possible. If you're in an HMO (health maintenance organization) or POS (point of service) plan, use your primary care physician to get referrals to specialists. If you're in a PPO (preferred provider organization), use network hospitals and network physicians. Your hospital