



Making Sense of Medical Bills

by Ramiro Valdez, Ph.D.

Kidney failure is a chronic illness. This means upon initiating dialysis or a transplant there will be many adjustments in the individual's life. This includes diet, fluid intake, daily medications, schedules, as well as emotional well-being. Fortunately, there are many healthcare professionals, as well as other patients, to help. One adjustment that is seldom addressed at the clinic arises when the patient must make changes in his or her finances. Yes, now the household budget includes medical expenses.

Most patients, both dialysis and transplant, are people who, prior to ESRD, paid their debts as they came due. They took pride in the fact that they were never bothered by unpaid bills or contacted by bill collectors. Now, many patients find themselves falling into debt with a reduction in income.

However, there are a few strategies that may assist to alleviate some of the financial worries brought on by medical expenses. The following suggestions have helped many patients find some relief from their financial concerns. They may not apply in every situation. For instance, these apply to medical bills only, not to the electric company or the department store. Further, different suggestions will help with different bills, but can provide assistance if followed carefully.

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First, be sure it is a bill. Often, you will receive an "Explanation of Benefits" (EOB) detailing what was charged and what was paid. Sometimes EOBs will display, "THIS IS NOT A BILL" in big, bold letters at the top of the page. You should still study it for accuracy.

Medical Bills, continued on page 12

Check the dates of service and be sure you were there on the date(s) listed. If anything does not match, a phone number will be listed where you can call for an explanation.

Next, before paying a bill, study it carefully to be sure it is yours and it is correct. Mistakes can happen. Check the name and social security number on the bill. Also, check the dates and the amount charged. Sometimes creditors send bills larger than they mean to. If any of the numbers look questionable, call the company.

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Often there are doctors' names on the bills unrecognizable to you. This is because your doctor may have asked another doctor for a consultation. The second doctor may have examined a x-ray, reviewed the record or simply talked to your doctor. He or she has the right to bill for these services. Also, an anesthesiologist does his or her work while you are under anesthesia, so you may never see this doctor, much less learn a name. If in doubt, call the doctor's billing company and ask what services he or she provided.

If you feel the bill is incorrect, call the provider and ask for a detailed explanation. After the explanation, if you still have reason to believe the bill is too large, inform the provider and write them a letter before you pay the bill explaining you would like to have an "adjustment" made on the bill. They may not make a change, but it is worth a try. There was an incident of a patient in the hospital who requested a throat

lozenger and was given an over-the-counter cough drop, usually costing \$1.50 per box. The hospital billed her over five dollars for the lozenger. She called and said this was exorbitant and would contact Medicare if the hospital was not willing to make an adjustment. They lowered the price. It was still an expensive lozenger, but the provider was willing to listen.

Most medical providers are honest and dependable, but if you encounter what you suspect is a fraudulent bill, it is important you contact Medicare and report it. Medicare has no way of knowing the bill is fraudulent unless you tell them. You can report fraud or even inappropriate treatment by personnel by calling the Office of the Inspector General at 800-447-8477.

Before you pay any bill, be sure they want you to pay it. Many agencies send bills as a formality. The company is expected to do this. Most providers who accept Medicare must show "Attempt to Collect," meaning they have to prove they made a legitimate effort to collect the portion of the bill not covered by Medicare.

If you are experiencing financial difficulties, talk to your social worker. In certain cases, those patients who demonstrate a financial need may have secondary costs, those not paid by Medicare, reduced or dropped.

Before you pay any medical bill, be sure no one else is going to pay it for you. Many of your bills, will be paid by Medicare, Medicaid, health insurance or some other third party. If you pay on a bill and Medicare also pays it, it may be a long time before you recover your money.

There are a variety of resources available to assist you with paying your bills. You may not know all of them. The clinic social worker should know about helpful programs. You can also contact the ESRD Network in your area. Many Networks have created a booklet about financial resources in your state. Contact the AAKP National office at 800-749-2257 for information regarding the network in your area.

Cover Story, continued on page 16

Find out if the bill can be “written off.” It is sometimes possible for a hospital, doctor or other medical agency to “write off” your bill. Many patients have difficulty asking for financial assistance. Your social worker should be able to assist you. If it is a hospital bill, you may have to contact the chaplain. There are forms to complete and you will need to tell people your household income and your expenses. This makes many patients uncomfortable, but remind yourself others experience this same situation.

If there are bills you do not understand, ask your social worker or the billing staff at the clinic to explain it to you. These professionals deal with bills all the time and can glance at a bill and know everything about it, whereas you could stare at it for hours and see nothing except a \$25,000 debt.

If you are being harassed by collection agencies, take the letter from the bill collector to your social worker. It is possible to stop the bill collectors.

Congress passed a law called the Consumer Credit Protection Act to protect individuals from being harassed by bill collectors, both by letter and phone, at home and at work. There is a specific form to be completed which is sent to the bill collector. Your social worker should be able to obtain a form for you and can also assist with completing it.

Bill collectors have to obey the law also, but they mail bills almost on a daily basis. Therefore, after you have sent the form you may still receive a bill. This is because the letters may have crossed in the mail or the form has not been delivered to the correct department.

Show a desire to pay off your healthcare debt.

Besides your medical expenses, you obviously have other family financial obligations such as groceries, utilities, housing, etc. If you make a legitimate attempt to pay off your healthcare debt, the collector should be satisfied. Even if you owe \$100,000, if you demonstrate you can only pay \$20 a month, this should be satisfactory.

Most service providers are going to do everything they can to help you get your bills paid. If you have a huge bill from a hospital or lab and cannot afford to pay anything for several weeks or possibly months (such as when your social security checks begin to arrive) it is only necessary to call the providers and explain this situation to them. Remember, their first priority is to receive their payment, not to cause you undue stress. If you explain the money will be sent at a later date, most of the providers are willing to wait a short time to receive the payment. Many will even set up a payment schedule with you.

Do not sign a payment schedule or promissory note until you have consulted with your social worker or insurance representative. Once you have given your word about making payments, you can be held to it. Your social worker can help you go over your household budget and determine how much you can afford

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to pay. Then you must make payments as you have promised. You can be taken to court for not fulfilling a promissory note.

Keep in mind there are professionals whose job it is to assist you with your medical bills and to help you find resources for payment. They will be glad to set aside a few minutes and explain your options to you. All you have to do is ask. If your clinic staff are not able to help you, contact the ESRD Network in your area or AAKP. ■