One way to reduce a medical debt is to review it carefully for errors and unauthorized charges. Also review any explanation of benefits (EOB) form you receive from your insurance company to see if it is consistent with the medical bill. If you see errors, contact the health care provider or your insurance company to have the erroneous charges taken off your bill.

Check also for charges based upon unauthorized balanced billing. The EOB may disallow a portion of the health care provider’s bill, pursuant to its agreement with the provider. Balance billing is when the health care provider bills you for the disallowed portion of the bill. Balance billing is prohibited in certain states.

If you have Medicare or Medicaid, providers are usually not allowed to bill you for rates higher than what these programs are willing to pay. They can only bill you for copays and deductibles. If you have both Medicare and Medicaid coverage and are enrolled in a Qualified Medicare beneficiary program, providers are usually not even allowed to bill you for the Medicare copays and deductibles.

If you receive a bill that you believe should be covered by insurance, Medicaid, or Medicare, contact your insurer to find out why the service was not covered. You may need to contact your health care provider also. If the insurance company made an error, they might be able to fix it when you call.

If your insurance company, Medicaid, or Medicare will not pay for a service that you needed, you have a right to appeal. Call your insurer and tell the insurer that you want to appeal their decision. Do this as soon as you can before the deadline for requesting an appeal. Contact your state insurance commissioner or state attorney general’s office if you need assistance.

Source: National Consumer Law Center, Surviving Debt [50th NCLC Anniversary Edition], updated at www.nclc.org/library
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