

Health Insurance Navigator

with Lisa Zamosky

The Affordable Care Act is bringing sweeping changes to American health care. Lisa Zamosky is here to help you navigate the health care maze and understand how these changes affect you.

Tuesday, January 11, 2011

Contacting Your Insurance Company: How to Handle Claims and More

A denied claim or refusal to pay for a medical care is among the most common reasons people call their insurance companies. If you've ever had to make that call, you know that doing so can feel like an exercise in futility.

This week, the Health Insurance Navigator talks with Marty Rosen, executive vice president and co-founder of Health Advocate, a healthcare advocacy and assistance organization. Rosen offers 5 tips for a successful telephone call with your health insurer.

1. Know your benefits: The easiest discussion with your insurance company is the one you don't have to have. Avoid problems in the first place by making sure you understand your benefit plan, the services you're eligible for and the rules you must follow in order to have your care paid for. Do you need pre-authorization from your insurer to see your doctor? Find out before scheduling an appointment.

Take action: Martin suggests keeping your Summary of Benefits – the document that outlines the details of your benefit plan – on hand when it's time to schedule medical care. "It's a fundamental piece to have available and to understand because that sets the framework for how things will be decided," Rosen says.

2. Keep good records: Insurance companies are typically large corporations with many departments in offices across the United States. Efforts to transfer or maintain important documents proving you're entitled to a benefit or have already paid for a service aren't always successful.

Take action: Save all documents sent to you by your insurer, doctors, hospitals and other health care providers (think explanations of benefits (EOBs), bills, proof of payments etc.) and have them in front of you when calling your insurance company. And, never send your only copy to your insurer.

3. Take good notes: Any conversation you have with your insurer should be well documented.

Take action: “Come up with a system and keep a log,” Rosen advises. Take careful notes about the people you speak with, their names, the date and what they tell you. It’s also a good idea to get in the habit, Rosen advises, of marking down the dates of your doctor visits, whether and how you paid the bill. These are the kind of details that can save you when a dispute over payment arises.

4. Just the facts: Customer service representatives need to know the salient facts of your situation if they’re to help you. The more articulate and organized you are the better response you’ll get.

Take action: Before your call, pull together and write down the three main points you need to get across. Then, stick to the script.

5. Take it to the top: If three calls to your insurer about the same problem leave you with three different answers as to how to resolve your problem, it’s time to climb the company ladder. Customer service representatives have limited authority, and their knowledge of each plan’s details and regulations are too often lacking.

Take action: Ask for a supervisor or executive-level company employee. Your request may meet with resistance, but keep pushing. “They are given a script,” Rosen says of the customer service people at insurance companies. “When they say there is no one else to talk to, that’s absolute nonsense.”

If you’re being stonewalled, file a formal appeal with your insurer. You may also be eligible for an external appeal with an independent reviewer in cases where your insurer won’t budge. Check with your state insurance department for details.

You can also enlist the help of billing advocates, who can be found through organizations such as Medical Billing Advocates of America and Health Advocate. And, low-cost or free legal services are available in every state. Check the nonprofit LawHelp.org for resources.

Got a health insurance question? Post it below. I’ll respond in this blog each Thursday to as many of your questions as I can.

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SOURCES:

1. Marty Rosen, Executive Vice President and Co-founder of Health Advocate, Inc.