

How to avoid hospital bills from doctors that don't take insurance

BY: EILEEN GUNN

Marissa Dennis had a relatively uneventful labor and recovery when her son was born at a New York City hospital in 2008. So she and her husband were taken aback when they received a bill for more than \$800 for the handful of routine check-ins they received from the on-call pediatrician.

"It was 10 times what the entire rest of the bill came to," she said. It turned out that while the hospital took the family's insurance, the pediatrician didn't. Dennis and her husband managed to pay the unexpected bill, she said, "but it really ticked us off."

Such stressful surprises aren't unusual in medical care today, billing experts say. Doctors who have privileges at hospitals typically aren't employees and aren't obligated to accept the same insurance the hospitals do. Often, functions like anesthesia, radiology, pathology or emergency room services are provided via contracts with a single large group that accepts little or no insurance because they prefer not to settle for the discounted payments that insurance companies routinely negotiate.

The best way to protect yourself is to learn to ask questions and even shop around, said Martin Rosen, co-founder of Health Advocate, Inc., a healthcare advocacy and assistance organization based in Plymouth Meeting, Pennsylvania. "We do this in other areas of our consumer life, but it's awkward to do it when it comes to our health because we aren't used to asking these questions and doctors aren't used to answering them."

Some tips on how to avoid these unexpected bills and to manage them if you can't:

Ask ahead

As part of a pre-procedure consultation, patients often receive a bundle of paperwork from the hospital or the doctor detailing the procedure and verifying insurance information, said Simone Rattiga, who worked as a medical billing analyst for more than 10 years in New York City, including several years at a large anesthesiology practice. This packet should also include services that will be ancillary to the procedure, like anesthesiology or pathology, and name the doctors who will provide them. "If you don't get this, ask for it and look it over carefully," she said.

If the doctors' names aren't there, speak to your doctor's office manager, or call the hospital and ask for patient accounts, she said. These people will know which doctors will be involved. Then you can call them directly and ask about insurance. If the medical group doesn't take your plan, the office manager or the patient accounts representative at the hospital should be able to help you estimate how much you might be billed. **"Don't be afraid to ask in advance if they can lower the cost for you," said Rosen. "You'd be surprised how often they will."**

If you have enough time before your procedure, Rosen suggests asking whether your doctor has privileges at more than one hospital. "One hospital

could have more ancillary doctors that take your insurance than the other,” he said. Moreover, “A large, sophisticated teaching hospital will have higher overhead and higher costs than a small local one,” he said. If your particular surgery is such that the care would be comparable at either place, ask your doctor to do it at the hospital that will be less costly for you.

Plead financial hardship

There are situations where it just isn't possible to vet all the doctors who wind up taking care of you, especially during an emergency room visit.

If the surprise bill that lands in your mailbox is going to cause genuine financial distress, call the doctor's office and say so. “If a bill was \$500 or \$1,000, I would usually be able to write it off to financial hardship without sweating it,” said Rattiga. If the bill is very large, the hospital might ask you to document your hardship, she noted. But for something that's less than \$1,500, a phone call or brief letter that explains your situation could be enough.

Ask for a discount

“Our research shows that no bill is too small to negotiate,” said Rosen. “If the bill goes to a collection agency they'll have to write off part of it anyway. So they have an incentive to work with you to find an amount you can afford.”

Ask for a payment plan

If they doctor's office can't do anything else, Rattiga said, it can at least work out a payment plan for you. But the sooner you call and the nicer you are about it, the more willing the billing rep will be to set a monthly payment that's manageable for you.

She noted, “When you get these big medical bills it's tempting to ignore them but you don't want to do that.”

In 2009, Meredith Gray was approved by her Aetna plan for reconstructive surgery following a bilateral mastectomy for breast cancer. But Aetna only paid \$3,000 of the surgeon's \$32,000 charge, and the company turned down Gray's appeal.

So Gray, who lives in Connecticut, sent letters to Aetna's CEO, as well as to Connecticut's commissioner of insurance and to its governor, M. Jodi Rell (who also survived breast cancer).

Aetna reversed its decision and paid the surgeon in full—plus interest. “You have to persevere,” advises Gray, a freelance fashion stylist and writer whose battle with breast cancer was documented by Lifetime TV. “Each person has to be their own advocate.”

A spokeswoman for Aetna says in an e-mail that the company determined the pay rate based on what the government (i.e. Medicare) pays, plus 25 percent, and the surgeon was unwilling to negotiate.

Gray's explanation of benefits, however, stated that she “was not responsible for any amount above what Aetna paid, and to contact us if she got a bill for the balance from the surgeon,” the spokeswoman says. “We protected our member from the balance bill.”

Even though my appeal was smaller than Gray's, its ending was a happy one for me and my insurer. The nutritionist taught me that eating two vegan meals a day can cure high cholesterol. She informed me that chicken breast is lower in cholesterol than chicken legs, and shrimp has so much cholesterol it should be avoided all together. (Who knew?)

I got my cholesterol down 30 points in six months and am officially in a statin-free zone. Says Empire BlueCross CEO Wagar: “By lowering your cholesterol, you'll have fewer health issues down the road, you'll avoid the side effects of statins, and you'll have lower costs. For us, paying \$343 was money well spent.”