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Health 411: Steps to resolving a medical bill dispute

If you can't resolve it with a hospital's billing department, chief executive or chief financial officer, turn to government agencies and consumer advocacy groups for help.

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Several months ago I went to the emergency room for a respiratory problem. I was treated and released the same night. I was a self-pay patient. I requested the detailed billing to compare with my medical record and found several errors, including duplicated charges and overcharged items. When I discussed this with the billing department they refused to admit it. What is my next step in this situation?

It's critical that you put your dispute with the hospital in writing, clarifying that your itemized bill contains items or services that have been billed in error, says Pat Palmer, founder of Medical Billing Advocates of America, a consumer advocacy group in Roanoke, Va. List each item you're disputing and request that the inaccurate charges be removed or that a written response with documentation to support the charges be sent to you.

If you've hit a brick wall with the billing department, escalate your complaint, says Martin Rosen, an executive vice president of Health Advocate, a patient advocacy organization based in Plymouth Meeting, Pa. Address your letter to either the chief financial officer or chief executive officer of the hospital, or both, and indicate that you've tried and failed to settle the matter with the billing department. "A reputable hospital, if it made an error, would make good on the fact that you were overcharged," Rosen says.

Be sure to send the letter via certified mail and keep copies of all correspondence, including bills and canceled checks. Also keep a record of the name and number of anyone you speak with. That case file will be useful if you have to take your complaint to an outside organization, Rosen says.

If you're being stonewalled by the hospital, file a complaint with the department of public health or insurance in your state. In California, state law requires hospitals to reimburse patients who have been overcharged. Complaints of noncompliance can be filed with the California Department of Public Health on its website. Go to <http://www.cdph.ca.gov>, click on the "Health Information" tab and then "Health Facilities Consumer Information System."

If your bill is large, it might be worth seeking outside help. For a fee, organizations like Medical Billing Advocates of America (billadvocates.com) and Health Advocate's consumer arm, Health Proponent (www.healthproponent.com), can help you fight incorrect charges or lower your bill. "Our track record is a 50% discount on average," Rosen says.

And given that you are a self-pay patient, you should be aware that a handful of states, including California, have laws limiting how much hospitals can charge patients who pay for care on their own.

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According to Anthony Wright, executive director of California advocacy group Health Access, patients without insurance are typically charged three to four times more than those with coverage.

My elderly mother has a urinary tract infection that won't clear up. She is allergic to most antibiotics so the doctors don't prescribe them, and they don't seem to know of anything else that she could tolerate. We are at a loss as to who to see next or where to go to get her treatment. Any guidance would be appreciated.

Being misdiagnosed or improperly treated for an illness is quite common, says Rochelle Porper, vice president of strategy for Best Doctors, a Boston-based medical consultancy that helps patients get the right diagnosis and treatment.

There's a good chance something has been overlooked or missed with your mom's case. Some possible alternatives to consider: "It's not uncommon to have a positive urine culture but not have a urinary tract infection," says Dr. Christopher Wolter, assistant professor with the Mayo Clinic who specializes in female and reconstructive urology. Often, misreading lab results leads to inappropriate treatment, Wolter says.

An overactive bladder, which is more common among the elderly, or other conditions that can cause reoccurring urinary tract infections may have been missed. Interstitial cystitis, a difficult-to-diagnose condition that may mimic a urinary tract infection, or even a prolapsed pelvic floor may be inhibiting your mother's ability to fully empty her bladder, according to Wolter.

"Medicine is a deductive science, rather than something we can see and know for sure," says Dr. Lisa Sanders, a primary care physician at the Yale University School of Medicine and author of "Every Patient Tells a Story: Medical Mysteries and the Art of Diagnosis."

The key is to find a doctor who will stick with your mom as her case is fully explored. For an elderly woman, a doctor who specializes in geriatric medicine is a good place to start. Wolter and Sanders also suggest finding someone who specializes in female urology or voiding dysfunction, a sub-specialty niche within the field of urology. A gynecologist, if your mom hasn't already seen one, is another specialist who may be helpful.

Just be sure to work with a primary care physician so that all doctor visits, tests and other treatment information make their way back to an internist who can monitor your mom's overall case. "Often people start to go down the sub-specialist rabbit hole and never go back to their primary care doctor," Sanders says. "The only person who is obligated to look at all of your studies is your internist."

Assuming your mother has Medicare coverage, you can search for a doctor on the Medicare.gov website. Click on the "Resource Locator" tab found on the home page to begin your search. Sanders also recommends going to a local academic medical center, where doctors are often up on the latest research and treatments and may have more time to spend with your mom during her visits. Also, most illnesses have a dedicated association or foundation, another good resource for information and specialist referrals.

Patient advocacy organizations such as In Need of Diagnosis (www.INOD.org) in Orlando, Fla., work to match patients with the correct physician and are a good option for those struggling to figure out what ails them. "We don't diagnose but try to find unexplored options that might lead to help and find a doctor who will hang in there with the patient," says Marianne Genetti, In Need of Diagnosis' executive director.

Experts say it's important to take an active role in your care. For starters, be prepared before going to the doctor by gathering your medical records and keeping track of your symptoms. Also, bring a list of things you want to discuss. "A doctor's appointment is more like a meeting between two kinds of experts—the patient, who is expert on their own experience, and the doctor who is expert on the broader issues," Sanders says.

Don't be afraid to ask pointed questions. "It's hard but you have to go back to your physician and say, 'I'm not getting better. Is it possible I've been misdiagnosed? Is there another disease that could be causing my symptoms?'" Porper says. "You're basically asking the physician to take a step back and shift his paradigm."

That will be easier if you bring someone with you to your appointment, Porper says. "Take another family member who can hold the doctor to task a little more powerfully and who can be your support and verbal advocate."