HOW TO PREVENT BILLING ISSUES

Billing and insurance can sometimes be confusing.

Check out these tips to prevent billing issues before, during, and after you receive care.

HOW TO PREVENT BILLING ISSUES BEFORE CARE

Know your benefits and how they apply to services.
You may want to compile a list of questions beforehand that you can ask your health care provider. The more informed you are, the more you can avoid unexpected scenarios or bills.

HOW TO PREVENT BILLING ISSUES DURING CARE

Talk with your health care provider during care.
When you are receiving care is a perfect time to ask questions about what’s happening at the appointment and how the health care provider is billing the services.

HOW TO PREVENT BILLING ISSUES AFTER CARE

Make sure your bill really is a bill.
As a reminder, the first paperwork you will likely get after receiving care is an “Explanation of Benefits,” which is not a bill. This is a breakdown from the insurance company that shows the costs of services, what insurance will likely cover, any applicable discounts, and what you will likely owe your health care provider, if anything. You should carefully review your EOB and compare it to any bill you do eventually receive from a health care provider.

Always call immediately if you notice a billing problem or if you do not understand the bill.
The sooner you bring it to someone’s attention, the fresher your experience will be with your doctors and hospital and therefore easier to track and resolve.

Who to contact when you have billing issues.
Wellmark processes the claims, but your health care provider sends you the bill. Reach out to the health care provider if you have questions.

Request an itemized bill containing a list of all the services requested.
If the claim or Explanation of Benefits (EOB) shows a different amount of what you owe than the bill your health care provider sent, request an itemized bill from your health care provider for comparison.