



CALIFORNIA HEALTH ADVOCATES

## Billing and Claims: Organizing Your Medical Bills

If you have Original fee-for-service Medicare, you may have to file claims if you see a provider who does not accept assignment or if your supplemental insurance is not part of the electronic processing program with Medicare. Filing your claims for Medicare Parts A and B and supplemental insurance payments will be much easier if you organize your medical bills and records. Here are a few steps to help you get your medical files in order:

### 1. Sort your Bills

Make a separate file folder for each provider (doctor, hospital, lab, ambulance service, suppliers, etc.). Arrange each provider's bills by date with the most recent one on top.

### 2. Sort your Medicare Summary Notice (MSN)

The MSN shows you the amount of the bill, whether the doctor or provider accepted assignment, how much Medicare approved and paid, and how much you still owe. A MSN is mailed to you (usually every three months) if you had a Medicare-covered service during that period. To get personalized up-to-date information on your Medicare account (such as copies of your MSN, status of your claims and Part B deductible), you may register online at [MyMedicare.gov](http://MyMedicare.gov).

Match each MSN with the corresponding medical bill, putting the MSN into the folders for each provider. Some MSNs list claims from more than one provider and you should make copies of these so you can put one in each provider's folder. If you don't have a MSN for each bill, it probably means that Medicare hasn't finished processing the claim.

### 3. Sort your Supplemental Insurance Claims

If you have supplemental insurance, such as a Medigap policy or retiree plan, and you gave Medicare information about the supplemental insurance, the Medicare Administrative Contractor will forward your claims to your

supplemental insurance company. If this does not happen, submit the provider's bill along with the MSN to your supplemental insurance company. Keep a copy of what you send and the date you sent it in your folder for each provider.

### 4. Fill out your Health Insurance Claims Record

To create a Claims Record, which is a helpful way to organize your insurance billing information, see our fact sheet "Billing and Claims: Health Insurance Claims Record" at [cahealthadvocates.org](http://cahealthadvocates.org). The form will guide you in figuring out how much you may owe. Keep your Claims Record up-to-date by revising it every time you get new information about your medical bills. If any documentation is missing, call your provider, your supplemental insurance company, or Medicare (1-800-633-4227) to get a copy of the missing paperwork.

### 5. Make all Payments by Check

Pay your portion of the providers' bills by personal check. If you receive a check from Medicare, deposit it in your account and write your own check instead of endorsing the payment from Medicare to your provider. By sending your own check, you will have your cancelled checks and bank statements as proof of your payment and as a back-up record of your medical spending.

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The Health Insurance Counseling and Advocacy Program (HICAP) provides free, objective information and counseling on Medicare and other related topics. You can call **1-800-434-0222** with your questions or to make an appointment at the HICAP office nearest you.