

MEDICARE SUMMARY NOTICES

UNDERSTANDING MEDICARE DOCUMENTS

WHAT IS AN MSN?

- A summary of health care services and items received during the past 3 months.
- Sent to people with Original Medicare
- It is **NOT** a bill!
- Lists any services that are denied or not covered by Medicare.



REVIEWING YOUR MSN

- Read the definitions and descriptions of services carefully.
- Check the notes section for payment decisions or to give you other important information.
- If a service you received is not covered, you can appeal. Instructions can be found on the final page of your MSN.
- Save your MSNs so you have a record of payment made by Medicare in case you need it in the future.
- If you lose your MSN or need a duplicate copy, call 1-800-MEDICARE or visit www.mymedicare.gov. For questions, please call MAP at **800-307-4444**.



MSNs - 3 Things to Look For:



Provider Location—Were you billed from a provider in a different city or state?



Date of Service—Were you billed for a service on a day you weren't seen?



Duplicate Billing—Were you billed for a product or service more than once?

Medicare Resources Online

- 1) If you don't have an account, visit **MyMedicare.gov**, and select "Create an Account."
- 2) Sign up to get other Medicare resources electronically, like Medicare Summary Notices and your "Medicare & You" handbook.
- 3) Check your eligibility, enrollment, and other Medicare benefits.
- 4) View a calendar of your current and upcoming preventive services.

Nevada Medicare Assistance Program



Your way through Medicare!

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EXPLANATION OF BENEFITS

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WHAT IS AN EXPLANATION OF BENEFITS (EOB)?

- Beneficiaries enrolled in Medicare Advantage (Part C) plans or Medicare Prescription Drug Plans (Part D) receive EOBs.
- A summary of services and items received, how much the provider billed, the approved amount your plan will pay, and how much you may owe.
- It is NOT a bill, and it is not the same as a Medicare Summary Notice.
- Usually mailed once per month or may be accessed online



REVIEWING YOUR EOB

- Read the information and the services listed in the notice carefully.
- If a service you received is not covered, you can appeal. Instructions are listed at the end of the EOB.
- If an item or service is not covered, look for a section with notes, comments or footnotes to find out why.

When reviewing EOBs:



- Compare your doctor's bill and your EOB to make sure the dates, providers, types of service & billing codes match.
- Make sure that you are not charged for services you didn't receive, or billed multiple times for a service you received once.
- If the insurance company rejected a claim, look for a note or "reason code" explaining why.
- If something doesn't seem right — contact your insurer at the customer service number listed on your EOB.
- Keep a file of your EOBs. They are important documentation if you need to **dispute a charge**, contest an insurance decision, or **seek financial help** from a hospital, charity, or state or local agency.
- When you do dispose of paper EOBs, shred them to help prevent **identity theft**.
- If you suspect billing fraud, contact MAP at **800-307-4444** or email: **NevadaMAP@adsd.nv.gov**
- **All calls are confidential and no charge.**

