

Medicare Doesn't Cover Everything

By Woodrow Wilcox

Medicare does not cover everything. Be aware of that.

Recently, an elderly woman asked me to review a bill that she got from her doctor. It was for over \$250. Most of the bill was for tests that the doctor ordered.

But, Medicare did not approve the charges. Because Medicare did not approve the charges, the Medicare supplement insurance company would not pay on the charges either. So, at least for now, the senior citizen is “stuck” with the big bill.

Here are some insights to help all senior citizens who rely on Medicare:

1. Realize that Medicare does not pay for any and all medical procedures or services. Long ago, a system was established in which Medicare could review procedures and services. If the procedure or service seemed medically necessary, it would be approved. If it was not medically necessary, it would be disapproved. If it is approved, Medicare will pay on it. If it is not approved, Medicare will not pay on it.
2. If Medicare will not approve and pay on a medical service or procedure, then the Medicare supplement insurance company will not pay on it either. This type of insurance is a Medicare supplement insurance. But, the supplement insurance company relies on the judgment of the Medicare officials. The insurance only supplements the Medicare.
3. There are many, many procedures and services that Medicare will not pay for a Medicare client. For example, eye glasses are not covered by Medicare, Routine dental services and procedures are not covered by Medicare. For some procedures or services, Medicare will pay for only a limited number of times per year, depending on the exact treatment or service.
4. Medicare routinely refused to pay when the doctor or service provider does not write notes which clearly demonstrate the medical necessity of a service or procedure. So, if you have a problem like the one I discussed above here, first contact the medical service provider to ask that the notes be augmented to clearly show the medical necessity of the service or procedure, and then that the claim be resubmitted to Medicare. I have used this method to help many senior citizens reduce their bills.
5. Realize that the federal government can and usually does change the deductible every year. When that happens, realize that your Medicare supplement insurance company will not make up the difference. You will.
6. Have extra cash in reserve, or extra insurance, to help cover dental, eye glass, or other medical services that Medicare will not cover.
7. If money is a problem, tell the doctor or other medical service provider that. Ask that they check whether the medical service or procedure will be covered by Medicare. If it won't be covered, ask that an alternative procedure or service that Medicare will cover be used to achieve the same results. Ask that the notes given to Medicare make it clear that there is a medical necessity for the procedure or services. As long as Medicare will pay, your Medicare supplement insurance company will pay. That will reduce the chances of an expensive surprise for you.