

How to Dispute Surprise Medical Bills

After receiving a \$21,500 doctor's bill for a mere 10 stitches, I researched bad medical billing. Here's how to fight it.

By **Melinda Wenner Moyer**

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In October, I received a doctor's bill for \$21,500 for treatment my daughter received in the emergency room of a local hospital after suffering a one-inch cut on her forehead. I remember opening the bill while walking down my driveway and nearly having a heart attack: How could 10 measly stitches possibly cost more than 20 grand? And why were we being billed for services we'd received at a hospital that was in our insurance company's network?

I'm one of many Americans who have had experiences like this. A 2020 report from the Kaiser Family Foundation, a nonprofit organization that focuses on national health issues, found that nearly one in five emergency room visits and up to one in six in-network hospital stays prompted an unexpected out-of-network medical bill.

These bills arise because even if you visit an in-network provider, you can still be treated by an out-of-network physician who works there, said Karen Pollitz, the co-director of the Kaiser Family Foundation's Program on Patient and Consumer Protections. "The doctors who work in hospitals generally don't work for the hospitals," she said. "They bill independently, and they can decide which networks they participate in."

In January, a new federal law called the No Surprises Act went into effect, aiming to prevent health care providers from sending surprise bills to people with private insurance. (Protections like this were already in place for people with Medicare, Medicaid and Tricare.) But "the hospitals don't always comply," said Marshall Allen, the founder of Allen Health Academy, a health literacy organization, and the author of "Never Pay the First Bill." So surprise bills are still a problem. And bills for medical care provided before 2022 — like my daughter's stitches — aren't covered by the law, either.

The good news is that with this new law in place, many unexpected medical bills can more easily be fought or lowered to a reasonable amount. Here's how.

Determine whether your bill is covered by the No Surprises Act, and dispute it if so.

If you receive a surprise medical bill, first figure out whether that bill is illegal under the new federal law. The law, which went into effect on Jan. 1, covers people who receive insurance through their employers or a health insurance marketplace or who have individual plans they purchased directly from an insurance company. It says that insurance companies have to cover, as if they were in-network, any out-of-network services incurred after receiving emergency or routine medical care at in-network medical facilities, as well as all air ambulance services, Pollitz said. Essentially, this means you can't be billed for more than what you're used to being charged for in-network services — and bills that ask for more are illegal.

If you receive a bill that you think violates the new law, you can challenge it in a handful of ways. The Centers for Medicare & Medicaid Services has a new help desk and hotline that anyone can use to ask questions and file complaints, so that's a good place to start, Pollitz said. (If a medical provider does send an illegal, surprise medical bill, it can be fined up to \$10,000.) Your state may also have a consumer assistance program you can contact, Pollitz added. These programs are typically staffed by lawyers who can help with medical bill disputes and answer insurance-related questions.

You might be able to make the bill go away without a formal complaint, Allen said. He recently advised a woman who had received an illegal, surprise medical bill to contact the hospital's billing department in writing. She told the department that the bill was in violation of the No Surprises Act and said it needed to contact her insurance company to resolve the charges. "Within 24 hours, she had a call and many, many apologies from the head of the billing department," he said.

Even if a bill is legitimate, you can still fight it.

Some surprise medical bills aren't covered by the No Surprises Act. These include bills for ground ambulance services, bills for medical care provided by out-of-network urgent care centers that are not licensed to provide emergency services and bills for some tests processed by out-of-network labs. And consumers are still required to pay for non-emergency care provided by out-of-network hospitals.

But you can still contest these bills or, in many cases, at least reduce what you owe, Allen said. First, ask the medical provider for an itemized bill that includes billing codes describing the care you received. If the provider is hesitant to give it to you, he said,

explain that the Health Insurance Portability and Accountability Act, known as HIPAA, requires medical providers to share this information with patients.

Once you have the itemized bill, check whether the billing codes the provider used, which are usually strings of numbers, accurately describe the care you received. (You can learn about the codes by Googling the code numbers along with the phrase “medical billing code.”) Often, medical providers bill for services they didn’t actually provide, or they bill for care that is more complex than what was delivered, Allen said. If that’s the case, he said, contest those charges and ask for a corrected bill by contacting the medical provider or the physician’s office directly.

You can also compare the amount of money the medical provider charged for each billing code with what insurance companies say is a reasonable amount to charge by looking up the codes on hospital websites or on the website of the nonprofit organization Fair Health Consumer. When I did this, I saw that although my daughter’s E.R. doctor charged \$17,000 for the stitches he had sewed (and another \$4,500 for the E.R. visit itself), the average out-of-network cost for these kinds of stitches where she was treated is \$2,983. In other words, he charged me more than five times the average out-of-network price. In this type of situation, you can contest the charges as being unfair and even take the provider to small-claims court.

Another smart thing to do is to track down your insurance company’s explanation of benefits — the statement that summarizes the medical services billed to the company — because your medical provider should have tried billing your insurance company before billing you. You can call your insurance company to get your statement, or you may be able to access it online on the company’s website. If your medical provider didn’t bill your insurance company first — meaning there’s no explanation of benefits at all — don’t pay the bill you received, said Nicole Broadhurst, a patient advocate and the founder of Tennessee Health Advocates. Instead, call and ask the provider to bill your insurance.

Don’t give up the fight.

It’s unfair, of course, that these burdens are placed on the consumer, especially when so many billing issues reflect mistakes made by medical providers or insurance companies. “It does take a certain amount of time, and it can take some hassle,” Allen said. “And you have to be persistent.” But for people who have the time and resources, he added, it’s important to fight unfair medical bills. In doing so, we not only help ourselves, but we also send a message to the broader health care industry. “We all need to stand up and say, ‘Hey, what’s been happening is not right, and we’re not going to let you do this anymore,’” he said.

Tracking down my company's explanation of benefits helped me understand my daughter's ridiculous E.R. bill. When I studied the statement, I saw that the doctor who sewed my daughter's stitches had tried billing my insurance but with the wrong billing codes, so my insurance company rejected the claim. The doctor should have resubmitted the claim to my insurance company with the corrected codes, but instead he billed me directly.

Fortunately, that sky-high bill has gone away, at least for now, because the doctor's billing department agreed to resubmit a claim to my insurance company. If the department does settle the bill with my insurance company, as it should, I'll consider that a win — but will ask for a different doctor the next time we go to the E.R.

Let Your Kids Lose It

Parents often don't like to see their kids get angry, but anger is a basic and even useful emotion that children need to experience. To help kids manage big feelings, parents should respond with empathy, help them develop a vocabulary of emotions and tell their kids when they are feeling upset, too.

Read more:

[How to Raise Kids Who Are Good at Getting Angry](#)

We want to hear from you.

Tell us about your experience with this newsletter by answering this short survey.

Ectopic Pregnancy in a Post-Roe World

Health care providers are concerned about how abortion bans may affect the treatment of ectopic pregnancy, a life-threatening condition in which a fertilized egg implants in the wrong place. For many women, the only treatment options are to end the pregnancy with medication or have surgery, and while abortion bans usually allow exemptions for medical emergencies, doctors worry that new laws could make these treatments difficult.

Read more:

[What Is Ectopic Pregnancy?](#)

The Week in Well

Here are some stories you don't want to miss:

- Dani Blum shares the stories of five L.G.B.T.Q. communities that have provided mutual support and love to one another over the years.
- Doctors, scientists and health care professionals are pushing back against health misinformation shared on TikTok, reports Rina Raphael.
- Sophie Egan investigates whether some processed meats are worse for you than others.
- Hannah Seo discusses the fruits, vegetables and drinks that can help keep you hydrated.
- And, of course, we've got the Weekly Health Quiz.

Let's keep the conversation going. Write to me at well_newsletter@nytimes.com.

Stay well!

Correction: Last week's newsletter about house plants misidentified tradescantia as the spider plant. The tradescantia genus includes spiderwort plants, not spider plants.