Medicare fact sheet

Know your rights on physician charges

- A state law limits the amount of money a non-participating physician can charge you for certain services.
- Doctors can only charge you 5 percent above Medicare’s approved payment amounts.
- This 5 percent cap applies to all services, except for certain home and office visits involving evaluation and management services. Those services are capped by federal law at 15 percent over Medicare’s approved payment amount.

If your doctor is a participating physician:

- Medicare coverage will pay participating physicians 80 percent of Medicare’s approved payment amount. They then are allowed to bill their patients only for the remaining 20 percent, usually picked up by supplemental Medigap policies.
- If your doctor is a participating physician, he or she has already agreed to accept Medicare’s approved payment amount as full payment for services.
- You can find out if your doctor participates by asking him or her before receiving services. You can also locate a participating provider by logging on to: www.medicare.gov/Find-a-doctor/provider-search.aspx or by calling Medicare Customer Service at 800-MEDICARE (800-633-4227) and following the prompts; or by saying “agent” in order to be connected to Medicare personnel.

A note from...
John T. McDonald III
Member of Assembly

Dear Neighbor,

These days, medical costs are skyrocketing, making it very difficult for seniors on fixed incomes to afford quality health care.

That’s why the New York State Legislature has made important changes to the Mandatory Medicare Assignment Law, limiting how much physicians can charge Medicare patients.

These changes will help you get the medical care you need at a cost that is fair. This brochure explains how the law works in several different situations.

As always, if you have any questions or comments, please contact my office. My address and phone number are listed below.

Sincerely,

John T. McDonald III
Member of Assembly
What is Medicare’s approved payment amount?
- First, ask your doctor. He or she is sent a list of Medicare’s approved charges by the Medicare carrier.
- You can review the Explanation of Medicare Benefits (EOMB) form or the Medicare Summary Notice (MSN) form, which the Medicare carrier sends you. It lists the provider’s name, date, type of service, the amount billed and the amount approved by Medicare.

What to do if you think you have been overcharged:
- Inform your doctor that based upon Medicare’s approved payment amount listed on your EOMB or MSN form – along with the limits on the amount he or she can charge in excess of the approved payment amount – you believe you have been overcharged.
- If you have already paid up front for the doctor’s service, ask the doctor to refund the amount that you were overcharged.

The rights and needs of senior citizens are very important and I am determined to see this law is effectively enforced. Please call my office with any questions or concerns that you may have.

Physician private contracting option
Physicians are allowed to opt out of Medicare and sign private contracts with their Medicare patients for what is normally covered by Medicare. Under these private contracts, doctors can charge unlimited fees, and neither they nor their patients can be reimbursed by Medicare or Medigap.

Doctors who sign these contracts cannot submit claims to Medicare for reimbursement for any patients for two years.

Medicare beneficiaries who sign private contracts with certain providers can still obtain Medicare-reimbursed services from other providers who have not signed such contracts.

Remember, always ask your doctor’s office staff if the doctor has opted out of Medicare before scheduling an appointment – and be sure to check with them again right before your scheduled appointment.