

IF I WIN A BIG LOTTERY PRIZE

By Woodrow Wilcox

On September 3, 2014, I spoke with two seniors that I wish I could have helped. One phoned me and the other visited my office to work with me on several medical bills. Both of them owed money because of the federal government's policy on "SELF-ADMINISTERED DRUGS".

I started working with senior citizens who had Medicare related medical bill problems in 2003. I never found a problem with "self-administered drugs" until 2010. I phoned Medicare and asked how this new problem for seniors started. No one at Medicare would ever give me a straight, direct answer.

Then, I thought of calling hospital billing supervisors to ask the same question. They told me that in 2009 President Obama's Attorney General Eric Holder started changing some definitions under Medicare that doctors and hospitals would be forced to use or they would not get paid any money from Medicare. The new definitions and rules created the problem of "self-administered drugs".

Briefly stated, when a senior citizen is in a hospital, but getting Medicare Part B defined services or medicine, Medicare Part A (hospital services) will not pay on those services or medicines. The senior citizen must pay the bill for "self-administered drugs" first and then file a reimbursement form with the Medicare Part D (medicines) plan insurance company that the senior uses. The Medicare Part D plan insurance company then compares what it would normally pay for medicines if the senior had bought the "self-administered drugs" through its approved network and not from the hospital. Then, it determines how much it will reimburse the senior, if anything. It is a very impractical system and many seniors don't ever file claims for re-imbursement.

The Obama administration created "self-administered drugs" definitions and rules save the federal government millions of dollars, make the drug making companies millions of dollars, and save the Medicare Part D insurance companies millions of dollars. But, these rules cost the senior citizens billions of dollars.

Today, I had to tell our senior citizen clients that they owed hundreds of dollars for "self-administered drugs". In the past, some clients have received such medicine bills for a few thousand dollars. Sometimes, it is easier for me to help the senior to negotiate a discount on the "self-administered drugs" bill with the hospital. It saves the senior both time and money compared with the reimbursement filing system under Medicare Part D.

Today, I remembered a thought that I have had repeatedly which is this: If I ever win a big prize in the lottery, I'm going to help some of our senior citizen clients who have "self-administered drugs" bills by helping them to pay off those bills. Note: Woodrow Wilcox is the senior medical bill case worker at Senior Care Insurance Services in Merrillville, Indiana. He has saved clients of that agency over one million dollars by correcting medical bill errors that were caused by mistakes in the Medicare system. He wrote the book SOLVING MEDICARE PROBLEMS\$ (www.solvingmedicareproblems.com).

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