

# Frequently Asked Questions about Medical Bills

## I received a medical bill, what do I do?

*We understand that receiving an unexpected medical bill can be extremely stressful. If you find yourself in this situation, please follow these steps.*

Call your provider's office using the billing contact number listed on the bill. If you have one, this can be done with your Case Manager (EIP/ADAP Clients) or Prevention Navigator (PrEP DAP Clients). Case Managers and Prevention Navigators are very knowledgeable and are a resource that is there to help you navigate difficult situations.

If you do not have a Case Manager or Prevention Navigator and would like one, please use the Medical HIV Case Management or Washington State Prevention Navigation Agencies link below for additional information. You may also reach out to Client Services via email at [Ask.EIP@doh.wa.gov](mailto:Ask.EIP@doh.wa.gov) (EIP/ADAP Clients) or at [PrEPDAP@doh.wa.gov](mailto:PrEPDAP@doh.wa.gov) (PrEP DAP Clients).

- [Medical HIV Case Management | Washington State Department of Health](#)
- [Washington State Prevention Navigation Agencies.pdf](#)

Once you have been connected to a representative in your provider's office, let them know that you have received a bill and you are calling to make sure that the insurance information on file for you is correct. Ask them to verify that the claim was billed to your insurance prior to being billed to you.

### ***NO, my primary insurance has NOT been billed:***

If you have primary insurance through your Employer, Qualified Health Plan, Individual, Medicare, or Medicaid, give your insurance policy information to the representative. This can be found on your insurance card. The information they will require is usually your ID number and your group number.

If you are uninsured and only have coverage through EIP or PrEP DAP, or have EIP or PrEP DAP as your secondary, you will need to give them your client ID number (let them know you do not have a group number, if they ask for a group number). Any information needed by your providers office can be found on your eligibility letter. EIP or PrEP DAP is the payer of last resort, after all over coverage including Medicare and Medicaid.

The following address is where claims can be submitted:

**Client Services**  
PO Box 47841  
Olympia, WA 98504

***YES, my primary insurance has been billed, but I still have a remaining balance:***

Ask the representative if/when they billed your SECONDARY insurance.

*Ex. "Thank you for billing my primary insurance, I am also covered through EIP (or PrEP DAP) as my secondary. Can you please submit the claim to EIP (or PrEP DAP) for processing? My client ID is XXXX."*

You can also request that while the claim is sent to your insurance provider the balance is placed on hold so that you don't receive any additional bills until insurance has processed the claim.

Most laboratories do not keep secondary information in their system, **you will need to make sure that the provider's office has both your primary and secondary insurance information at every visit.**

Client Services should **only** be contacted if you and your Case Manager (EIP/ADAP Clients) or Prevention Navigator (PrEP DAP Clients), if you have one, has contacted the provider's office to provide them with all the necessary insurance information and you are continuing to receive bills. When contacting Client Services, please make sure you provide the following:

- **A copy of your bill**
- **The invoice number**
- **The date(s) of service**
- **The services you are being billed for (CPT Codes)**

Client Services will then check our billing system to see if the provider's office billed us, or if there was an error with the payment.

Please, do **NOT** wait until you received your second bill, third bill, or collections notice from the provider's office to contact Client Services. **Contact the billing provider as soon as you receive a bill.**

**If you are sent to collections and have failed to provide the insurance information to the billing provider, EIP cannot assist in removing the bill from collections.**

## I was sent to collections, what do I do?

*Being sent to collections is frustrating, but it is a process that may be able to be undone if the proper steps are taken.*

**Do not** call the collections company, call the billing provider. If you are case managed, your Case Manager can assist you with the process.

The contact information for the provider should be on the collections letter. If not, call the collections company and ask them for the number to the providers office and the invoice information.

When contacting the providers office, ask if your insurance was billed.

### ***NO, my insurance has NOT been billed:***

Ask the billing provider if they could please pull the account from collections and bill your insurance.

If you have primary insurance through your Employer, Qualified Health Plan, Individual, Medicare, or Medicaid give your insurance policy information to the representative. This can be found on your insurance card. The information they will require is usually your ID number and your group number.

If you are uninsured and only have coverage through EIP or PrEP DAP, or have EIP or PrEP DAP as your secondary, you will need to give them your client ID number (you do not have a group number, if they ask for a group number). EIP or PrEP DAP is the payer of last resort, after all other coverage including Medicare and Medicaid.

The following address is where claims can be submitted:

#### **Client Services**

PO Box 478

Olympia, WA 98504

***YES, my primary insurance has been billed, but I still have a remaining balance:***

Ask the representative if/when they billed your SECONDARY insurance.

*Ex. "Thank you for billing my primary insurance, I am also covered through EIP (or PrEP DAP) as my secondary. Can you please submit the claim to EIP (or PrEP DAP) for processing? My client ID is XXXX."*

If they are unwilling to pull the account from collections and bill your insurance, then you will need to dispute the charges with the collections company. **EIP is not able to assist in removing the account from collections if you did not give the proper information to the billing provider in a timely manner.**

If they state they have your primary and secondary coverage information and they have been billed and you still have been sent to collections, then you and your Case Manager if you are case managed, can contact Client Services. The following items will be needed:

- **The invoice number**
- **The date(s) of service**
- **The services you are being billed for (CPT Codes)**