Stupid Smart Health

Health Guide

How to Fight a Medical Bill — and Actually Win

Scripts, tactics, and your legal rights.

Studies suggest up to 80% of medical bills contain errors. Even when they don't, most bills are negotiable. Here's how to handle both.

START HERE — Before You Pay Anything: Request an itemized bill in writing. Say: "I am requesting a full itemized bill showing all charges separately." Providers are legally required to supply this. Review it before paying a single dollar.

Which Path Are You On?

Your approach depends on whether the bill has an error, or whether it's correct but unaffordable.

PATH A — The Bill Has an Error (Highest Success Rate)

1. **Get the itemized bill.**
   Request in writing, not just by phone — written requests create a paper trail. The provider must provide it within 30 days.
2. **Compare it line by line to your EOB.**
   Your EOB from insurance shows what you should owe. Any discrepancy between the two is a red flag.
3. **Flag the specific errors.**
   Look for: duplicate charges, dates or services you don't recognize, wrong procedure codes, or services billed at a higher level than what you received (called upcoding).
4. **Dispute in writing — certified mail.**
   A written dispute creates a legal paper trail. Phone calls leave no record. State the specific error and what you believe the correct amount should be.
5. **Escalate if needed.**
   File a complaint with your state insurance commissioner or CMS at cms.gov/medical-bill-rights/help/submit-a-complaint.

PATH B — Bill Is Correct, but Unaffordable

Call early — bills are easier to negotiate before they are 60 days past due. Ask to speak with someone who has authority to adjust balances.

Opening script:

> *"I want to pay what I owe. This amount isn't feasible for my family right now. Can we discuss options?"*
> *(If asked what you can do: "I can manage $[X] per month. Can you submit a hardship adjustment for my account?")*

Three things to ask for specifically:

- **Payment plan:** Often available at 0% interest — but you may need to ask.

- **Prompt-pay discount:** Pay a reduced amount today in full. Often 20–40% off — rarely advertised.
- **Financial hardship reduction:** Ask billing to submit a hardship adjustment for supervisor review.

Charity Care — The Option Most People Never Ask About

All nonprofit hospitals are legally required to offer financial assistance programs. If your income is below 200–400% of the federal poverty level, you may qualify for significant forgiveness — sometimes 100% of the bill. You have up to **240 days from your first bill** to apply.

> *"What is your charity care or financial assistance program, and how do I apply?"*

Your Legal Rights

- **No Surprises Act (federal):** If your final bill is $400 or more above the good faith estimate you were given, you can dispute it within 120 days.
- **Itemized bill:** Providers must supply one within 30 days of request.
- **Charity care:** All nonprofit hospitals must have a financial assistance program by law.
- **Medical debt and credit reporting:** Laws are changing rapidly. Many states now restrict medical debt from appearing on credit reports. Check your state's current rules.

The Escalation Map

> Billing Rep → Billing Supervisor → Patient Financial Advocate → Hospital Administration If you're getting nowhere with billing, ask for **Patient Relations** or **Patient Financial Services** — they carry more authority than a standard billing rep. If all else fails, contact your state insurance commissioner or the CFPB at consumerfinance.gov.

Sources

- CMS: cms.gov/medical-bill-rights/help/guides/financial-assistance
- CMS: cms.gov/newsroom/fact-sheets/no-surprises-understand-your-rights-against-surprise-medical-bills
- Consumer Financial Protection Bureau: consumerfinance.gov (medical billing challenges report)
- NPR: npr.org — "How to eliminate, reduce or negotiate a medical bill"
- Patient Rights Advocate: patientrightsadvocate.org/how-to-fight-medical-bill-overcharges
- LendingTree: lendingtree.com/personal/how-to-negotiate-medical-bills (success rate data)

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