

Questions & Answers

Q - Will you bill Medicare?

A – Yes, BMC will bill directly to Medicare for your services.

Q – Will you bill my secondary/supplemental?

A – Yes, we will bill your secondary/supplemental insurance.

Q – Will I still receive a check to deposit in my account?

A- No, Medicare and your secondary/supplement will pay BMC directly.

Q – Will I have any out of pocket expenses?

A – Yes, you may have out of pocket expenses for Medicare’s 20% co-insurance and deductibles.

Q – Will my secondary pay my out of pocket expenses?

A- Each insurance policy is different and you will want to check your individual policy and call your insurance provider.

Q - Are there any services that are not covered by Medicare?

A – Yes, and you will be asked to sign a waiver telling you the cost that you may be responsible for paying.

Q – Will my secondary pay the charge if I have signed a waiver?

A – Many insurance policies do not pay if Medicare does not cover. Please check with your insurance provider.

Q – Will there be any additional fee added to service charges?

A – No, now that BMC is accepting Medicare assignment there will not be additional limiting fees (10 – 15%).

Q – Will I need to do anything to have BMC accept Medicare assignment?

A – Yes, You will need to stop at the front desk and check in and bring a copy of your Medicare card and your secondary/supplemental insurance card.

Q- Will Medicare automatically send my secondary a bill?

A – Medicare will do a Crossover to your secondary if you call Medicare or your secondary/supplemental carrier and ask for this service. Most insurances offer crossover service if you ask for it.

Q – Will my annual Physical exam be covered 100% by Medicare?

A- Medicare offers a Welcome to Medicare exam and in the 1st 12 months of eligibility. Each year following you are allowed a Wellness Exam.

Q – Are there any secondary/supplemental Medicare insurance plans that BMC does not accept?

A – BMC cannot see patients with Advantage or PFFS (Private Fee for Service) Plans offered by insurance carriers.

BMC does see patients who have Rocky Mountain Health Plans for Seniors.

All services provided through December 31, 2012 by BMC will be billed as non-assigned claims. Beginning January 1, 2013 all Medicare services will be billed as assigned claims.