

ObamaCare Clusterfuck: Preventive testing isn't preventive care, and hospitals game testing payment too

Submitted by [lambert](#) on Thu, 01/23/2014 - 5:44am

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The new health-care law encourages people to get the preventive services they need by requiring that most health plans cover cancer screenings, contraceptives and vaccines, among other things, without charging patients anything out of pocket. Some patients, however, are running up against coverage exceptions and extra costs when they try to get those services.

For example, a colonoscopy:

Rebecca Hyde of Woodstock, Conn., was angry when, after getting a colonoscopy to screen for cancer in December, she got a notice that her insurer was charging a hospital "facility fee" of \$1,935 against her \$6,000 deductible. Such fees are not uncommon for hospital-based care

But since colonoscopies are recommended starting at age 50, the 53-year-old had not expected to owe anything out of pocket.

"I thought it was the bait-and-switch: They tell you it's going to be preventive and then you get a really large bill," she says.

Hyde discussed the problem with hospital billing staff, who offered to resubmit the bill using a different procedure billing code. Hyde says she hopes the issue can be resolved without having to appeal to her health plan.

Hyde's experience is not unique, says Mona Shah, associate director of federal relations at the American Cancer Society Cancer Action Network.

Well, great. Now we have to game the billing codes to do the right thing. And how many patients just sigh and pay up?

Implementing the preventive services provisions will require constant monitoring, "and not just through complaints," [Karen Pollitz, a senior fellow at the Kaiser Family Foundation] says. "Because for every person who complains, there's a whole lot more who don't complain or don't even get the service."

Or we could just make the useless billing complexity go away with single payer.



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