

# PATIENT AUDITOR PROGRAM

## ASEA Health Benefits Trust

Address: PO Box 5434, Spokane, WA 99205 • Phone: 866-553-8206 (toll-free); 509-328-0300

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The Patient Auditor Program provides members an incentive to review and identify billing errors. This program allows you to share in the savings if you find an error on your health care provider's bill. If the error is greater than \$100 on a single bill, you would be eligible for one-half of the total savings up to a maximum of \$400.

To use the program, follow these steps:

- Request an itemized bill when you leave the hospital, clinic or physician's office.
- Review the bill carefully to make sure that you were charged only for the services you actually received. You may find the following hospital checklist useful to compare charges with actual services received.
  1. Were you charged for the correct number of days? You should be charged beginning with the day you were admitted through the day before you were discharged. You should not be billed for the day of discharge if you leave before the hospital's standard check out time.
  2. Were you charged for the right type of room (semiprivate, intensive care, etc.)?
  3. Were you charged for medication that you do not remember taking?
  4. Were you charged for take-home prescriptions that you did not receive?
  5. Were you billed for tests and services that were ordered but later canceled?
  6. Are there any duplicate charges on your bill?
  7. Were you billed for the standard preoperative tests even though they were never performed?
  8. Were you charged for operating or recovery rooms or anesthesia even though surgery was not performed?
  9. Do any charges seem unusually high? Misplaced decimal points may increase your bill by hundreds of dollars.
- If you find an overcharge, send ASEA/AFSCME Local 52 Health Benefits Trust: (1) a completed award request form, (2) the original bill with the overcharges circled, and (3) a corrected bill. After verification of overcharges of at least \$100 and recovery of any overpayments, the Claims Administrator will issue you a check for 50% of the savings up to a maximum of \$400. All awards are considered taxable income.

### PATIENT AUDITOR AWARD REQUEST FORM

Member name: \_\_\_\_\_

Aetna or ASEA alternate ID number: \_\_\_\_\_

Patient name: \_\_\_\_\_

Relationship to employee: \_\_\_\_\_