

**MEDICARE OPEN ENROLLMENT
OCTOBER 15-DECEMBER 7, 2014**

**MEDICAID ENROLLMENT
90 DAY TO APPLY FOR MEDICAID EXPANSION**

**TO APPLY FOR QUALIFIED HEALTH PLAN YOU WILL NEED TO APPLY AT
HEALTH LINK OF NEVADA UNTIL NOVEMBER 7TH
AFTER THE 9TH YOU WILL BE ABLE TO APPLY AT ACCESS NEVADA**

**EXEMPTIONS ARE AVAILABLE FOR THOSE WHO DOES NOT HAVE AN
ALTERNATIVE RESOURCE**

**PLEASE CALL (775)574-1018
HEALTH BENEFIT REPRESENTATIVES
WILMA SMITH-TOBEY EXT. 1213 LETISHA ROSALES, EXT. 1251
TEMPORARY HBR CLERK CYNTHIA CHRISTENSEN 1238**

READING YOUR BILLING STATEMENT

STATEMENT	
<i>Account Summary</i>	
Account Number	-QRNO1
Patient Payments in Last 30 Days	0.00
Current Statement Balance	25.25
Charges Pending w/ Insurance	0.00
Total Account Balance	25.25
See Detail on Back	

**PATIENT
ACCOUNT
NUMBER**

Ensure you are able to locate an ACCOUNT NUMBER and DATE OF SERVICE

Many times patients present with their billing statement and state "HOW COME THIS HAS NOT BEEN PAID?" Often, although you notify the hospital, facilities or providers of your insurance carriers they may be billed incorrectly.

****Helpful Information****

Read the billing statement and ensure that the Insurance information is correct, if not please contact the billing department and notify them of the corrections needed. You will need the Patient Account Number and Date of Service and they will resubmit the claim.

<i>Insurance Information</i>	
PLEASE CONFIRM THAT INFORMATION IS CORRECT TO UPDATE GO TO www.ezmedinfo.com/rno1	
PRIMARY	
Insurance	MEDICARE OF NEVADA
Group/Plan	
ID Number	XXXXX
SECONDARY	
Insurance	INDIAN HEALTH SVCS
Address	2 HOSPITAL RD
City/State/Zip	SCHURZ, NV 89427-
Group/Plan	
ID Number	

**PRIMARY
INSURANCE**

Ensure that your Primary Insurances is listed on the bill.

**SECONDARY INSURANCE
OR PAYOR OF LAST**

Ensure there is a Secondary Insurance if applicable.

If there is no Primary or Secondary, ensure Indian Health Services is listed: Indian Health Service
Schurz Service Unit
Drawer A
Schurz, Nevada 89427