

Reducing Health Insurance Stress as a Caregiver



Caregiving is hard and adding the stress of health insurance challenges can make things feel overwhelming. Here are a few tips to help you reduce some of the health insurance-related stress you may feel as a caregiver for a loved one.

Keep your paperwork organized.

The amount of paperwork that comes along with healthcare can be difficult to manage. It's important to create systems to help you organize the documents you receive, including bills for care and medical records. Do what's best for you. If having physical copies of documents works better for you, create a paper file system and set up a spot in your home for all the medical files. Or, embrace technology and set up some spreadsheets along with utilizing online health portals. Whichever way is easiest for you is fine as long as it ensures you can easily locate documents you might need later.

Take notes when you speak with your health insurance company.

Anytime you talk with a representative of your health insurance company, be sure to write down the date and time of your call, the name of the person you spoke with, and important details of the call. You can keep your notes straight using a communication log, **like this one**. Try to keep these notes or logs together in a central location in case those notes need to be referenced at a later date. It's also a good idea to ask the representative for a reference number in case the call needs to be reviewed down the line.



Connect with other caregivers.

If you are running into issues with health insurance not covering treatment that your loved one needs, online outlets like forums and Facebook groups can offer great support. You can pose questions to see if other caregivers and families are experiencing similar issues with their health insurance coverage. And if so, you may get some tips on how to best manage the issue. If nothing else, you may be able to gain some social support by hearing from others in a similar situation.



Reach out to a professional if you need help.

If you need help finding support or have questions about health insurance challenges, don't hesitate to reach out to Patient Advocate Foundation's Case Management services. You can reach us online 24/7 through our online portal [here](#). Services are free of charge and you will be matched with a case management professional who will work with you one on one to help resolve your issue. Or, if you don't need direct services but would like to see what resources might be available for your loved one, you can check out our National Financial Resource Directory [here](#) which makes it easy to link up with practical support.

Make sure you check your EOB against any medical bills.

You can request an itemized bill from your loved one's healthcare provider that breaks down each service, especially if there was a hospital stay or complex procedure involved. Make sure you haven't been charged for procedures or items that were not received. Don't pay a bill for the care you believe should be covered until you receive an Explanation of Benefits document from your insurer explaining why the claim was denied. An Explanation of Benefits (often referred to as an EOB), is a document that shows the healthcare services received, what the health insurance policy paid, and what is owed. If the amount the EOB says is owed does not match the medical bill you received, you should call the healthcare provider and the insurance company for more information.

Stick with in-network providers when you can.

No matter what type of plan you have, the lowest charges will be for providers who participate in your insurance network. This doesn't apply just to doctors- be sure the pharmacies, labs, outpatient clinics, and hospitals, basically anywhere care is received, are in-network with your insurance policy. The responsibility of making sure the provider is in-network falls on the member, so it's important to ask the right questions before care is received. If you want to verify that a provider is in-network, you can easily check online on your health insurance member portal or call your plan directly at the number on the back of your member ID card.

