

What should I do if I am overcharged in spite of the law?



The Pennsylvania Department of State has the responsibility to enforce the law and resolve the claims of overcharges.

If you believe that you are being overcharged, you should contact the Pennsylvania Department of State Complaints Office at, 1-800-822-2113.
This is a toll free call.



What punishment does the law provide for violators?



The law provides for reprimands and substantial fines for practitioners found in violation. These fines will be imposed by the state's appropriate professional licensing board.



Where can I get more information?



More information on the law can be obtained from your local Area Agency on Aging, listed in the blue pages of your telephone directory, or contact:

The APPRISE State Health Insurance Counseling Program at, 1-800-783-7067.



DEPARTMENT OF AGING

"MOM" MEDICARE OVERCHARGE MEASURE



Answers to your
Questions about the
"MOM" Law



What is the law affecting Medicare charges?



The law's technical name is The Health Care Practitioner's Medicare Free Control Act, but it is commonly called "the MOM legislation", for its original name, Medicare Overcharge Measure.

The law was enacted on September 8, 1990. It protects people on Medicare from being overcharged by doctors and other health care practitioners by making it illegal in Pennsylvania to charge a higher fee than that approved by Medicare.



What is an "overcharge"?



An overcharge is the amount of money billed by a health care practitioner to a patient that is in excess of the Medicare approved charge.

Many people have never been overcharged by a doctor. But for others, the overcharges can total several thousand dollars per year.



How will the Medicare Fee Control Act, or "MOM" Law affect me?



If you are a Medicare recipient, doctors and other health care practitioners must accept the Medicare reasonable payment for the Medicare covered services they offer. In other words, they may not bill you more than the approved charge set by the U. S. Secretary of Health and Human Services.



Can you give an example?



A practitioner's fee for a procedure is \$130 and the Medicare approved charge for the procedure is \$100. Medicare will pay \$80 and you (or your insurer) must pay the remaining \$20. You may not be charged the \$30 amount that exceeds the approved charge.



Will I still be responsible for the 20 percent copayment that Medicare requires?



Yes. Many people purchase "Medigap" policies, which cover the 20 percent copayment.

Either you or your insurance company will still need to pay the 20 percent copayment.

You are also still responsible for the annual Medicare deductible.

For more information on "Medigap" and other health insurance, contact your local APPRISE program. APPRISE insurance counselors can answer questions about various kinds of health insurance. You can reach an APPRISE coordinator at your local

Area Agency on Aging, listed in the blue pages of your telephone directory, or call **1-800-783-7067**.



Does the law change what Medicare will cover?



No, the law does not change the list of services Medicare covers. Services such as routine examinations, tests and cosmetic surgery will still not be covered by Medicare.



Are all doctors covered by this law?



The law applies to all "health care practitioners". This law includes medical doctors, osteopathic doctors, dentists, optometrists, chiropractors, pharmacists, physical therapists and others.



Does this include nonparticipating physicians?



Yes. Nonparticipating physicians and providers cannot charge or collect more than the approved charge from the beneficiary.



Are suppliers of medical equipment covered under the law?



No. Medical suppliers are not affected by the law.