

WHAT IS A MEDICARE SUMMARY NOTICE?

The Medicare Summary Notice, also called an MSN, is a quarterly report of Medicare services received by beneficiaries. The MSN lists detailed information about the beneficiary's Medicare claims. MSNs are mailed to beneficiaries enrolled in Medicare Part A and/or Part B.

The Medicare Summary Notice (MSN) is NOT a bill.

Using your MSN to detect fraud, errors and abuse

- **Protecting** your personal information is the first line of defense against fraud. Although you should save your Medicare Summary Notices and related statements, make sure to shred them when they are no longer useful. Shredding important documents like your MSN, Explanation of Benefits (EOB), other statements and bills will ensure that thieves cannot get their hands on this sensitive information.
- Reviewing your MSN is one of the best ways that you can help **detect** potential errors and fraud. It is important to immediately open and read your MSN to make sure that you have received all of the services listed. Use the **Personal Health Care Journal**, which you can obtain from your local SMP, to keep a record of medical visits, tests, receipts for services, and equipment you have received.
- Be aware that although Medicare only mails MSNs every three months, you can view your MSNs 24 hours a day by visiting **www.MyMedicare.gov**. Registering for Medicare's free, secure service allows you to review all claims processed within the past 15 months. For Medicare questions you may also call Oregon SHIBA at 800-722-4134 or visit **SHIBA.Oregon.gov**.
- Review your MSN and compare it to your receipts, records and **Personal Health Care Journal**. If you notice any mistakes, or have questions, **report** them immediately! Call your provider or health plan with your questions. If you still have unanswered questions, call your local SMP.

Oregon SMP

For SMP information, contact the ADRC of Oregon

1-855-673-2372

www.ADRCofoOregon.org

WHAT INFORMATION SHOULD YOU LOOK FOR ON YOUR MSN AND RELATED STATEMENTS?

Plan	Coverage	Statement	Information to look for
Medicare Part A	Hospital, skilled nursing facility, home health and hospice care	MSN (Quarterly)	<ul style="list-style-type: none"> ✓ Dates of service ✓ Benefit days used ✓ Amount charged ✓ Amount you may be billed ✓ Non-covered charges ✓ Deductible and co-insurance amounts you may be billed ✓ Additional notes about your claim ✓ Deductible information ✓ Appeals information
Medicare Part B	Outpatient services (doctor visits, lab tests, medical equipment, ambulance, immunizations, screenings)	MSN (Quarterly)	<ul style="list-style-type: none"> ✓ Dates of service ✓ Services provided ✓ Amount charged ✓ Amount Medicare approved ✓ Amount Medicare paid provider ✓ Amount you may be billed ✓ Additional notes about your claim ✓ Deductible information ✓ Appeals information
Medicare Part C (Medicare Advantage)	According to your plan	Statement from the private insurer	<ul style="list-style-type: none"> ✓ Your Medicare Advantage company may provide you with a statement which provides an explanation of the benefits that they have covered.
Medicare Part D	Prescription drugs	Explanation of Benefits (EOB) from the drug plan (Monthly, if benefits are used)	<ul style="list-style-type: none"> ✓ Year-to-date costs in the drug plan ✓ Total out-of-pocket and drug costs ✓ Current coverage information (deductible, coverage gap, etc.) ✓ Summary of claims since last EOB ✓ Any updates to plan's formulary
Supplement Insurance (Medigap)	Benefits covered by private insurers	Explanation of Medicare Benefits (EOMB) from the Medigap company	<ul style="list-style-type: none"> ✓ Total charges ✓ What Medicare paid ✓ What Medigap paid

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