What is a Medicare Summary Notice (MSN)?

Beneficiaries enrolled in Original Medicare (Parts A and B) receive Medicare Summary Notices or MSNs. Medicare only mails MSNs every three months, but you can view your MSNs 24 hours a day by visiting Medicare’s Medicare.gov website which allows beneficiaries in Original Medicare to log into (or create) a secure Medicare account to view their most recent MSNs, track claims made on their behalf, and check payment status. Creating a free, secure account with Medicare allows you to review all bills processed within the past 36 months.

What is an Explanation of Benefits (EOB)?

Beneficiaries enrolled in Medicare Advantage (Part C) plans or Medicare Prescription Drug Plans (Part D) receive Explanations of Benefits or EOBs. EOBs are mailed monthly if services are received, however, beneficiaries can check with their plan to see if they have an online service for accessing claims made on their behalf and payment status.

What do MSNs and EOBs Explain?

- What the health care provider billed
- The amount approved by Medicare for payment
- How much Medicare paid
- What the beneficiary may be billed

Using Your MSN or EOB to Detect Fraud, Errors, and Abuse

- Review your Medicare statements as soon as they arrive to ensure all of the services listed were actually received. Reviewing your MSN or EOB is one of the best ways that you can help detect potential errors, fraud, and abuse.
- Keep a record of medical visits, tests, receipts for services, and equipment you have received. A My Health Care Tracker, which you can get from the SMP, can help you keep a record.
- Compare your MSN or EOB to your receipts and records to your My Health Care Tracker. If you notice any mistakes, or have questions, call your provider or plan with your questions. If you still have questions or need further help, contact your local SMP!

This project was supported, in part, by grant number 90MPRC0002 from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official Administration for Community Living policy.
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<th>Plan</th>
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<td>Medicare Part A</td>
<td>Inpatient hospital, skilled nursing facility, home health, and hospice care (the MSNs for each of these is a bit different)</td>
<td>MSN (quarterly or online at <a href="https://www.medicare.gov">Medicare.gov</a>)</td>
<td>• Date of Service&lt;br&gt;• Provider Name and Address&lt;br&gt;• Benefit Days Used&lt;br&gt;• Claim Approved? (Yes or No)&lt;br&gt;• Non-Covered Charges&lt;br&gt;• Amount Medicare Paid&lt;br&gt;• Maximum You (Beneficiary) May Be Billed&lt;br&gt;• Notes for Claim&lt;br&gt;• Appeals Information&lt;br&gt;• QMB Status</td>
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<tr>
<td>Medicare Part B</td>
<td>Outpatient services (doctor visits, lab tests, medical equipment, ambulance, immunizations, screenings, and more)</td>
<td>MSN (quarterly or online at <a href="https://www.medicare.gov">Medicare.gov</a>)</td>
<td>• Date of Service&lt;br&gt;• Provider Name and Address&lt;br&gt;• Service Provided &amp; Billing Code (or Quantity &amp; Service Provided)&lt;br&gt;• Service Approved? (Yes or No)&lt;br&gt;• Amount Provider Charged&lt;br&gt;• Medicare-Approved Amount&lt;br&gt;• Amount Medicare Paid&lt;br&gt;• Maximum You (Beneficiary) May Be Billed&lt;br&gt;• Notes for Claim&lt;br&gt;• Appeals Information&lt;br&gt;• QMB Status</td>
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<tr>
<td>Medicare Part C</td>
<td>Medicare-covered benefits and others, according to the beneficiary’s Medicare Advantage plan</td>
<td>Explanation of Benefits (EOB) from the Medicare Advantage plan (monthly, if benefits are used)</td>
<td>The beneficiary’s MA plan provides an Explanation of Benefits statement that describes what the plan has covered.</td>
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<td>Medicare Part D</td>
<td>Prescription drugs</td>
<td>Explanation of Benefits (EOB) from the drug plan (monthly, if benefits are used)</td>
<td>• Year-to-date costs in the drug plan&lt;br&gt;• Total out-of-pocket and drug costs&lt;br&gt;• Current coverage information (deductible, coverage gap, etc.)&lt;br&gt;• Summary of claims since last EOB&lt;br&gt;• Any updates to the plan’s formulary</td>
</tr>
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<td>Supplemental Insurance</td>
<td>Benefits covered by private insurers</td>
<td>Explanation of Benefits (EOB) from Medigap company</td>
<td>• Total charges&lt;br&gt;• What Medicare paid&lt;br&gt;• What Medigap paid</td>
</tr>
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**How Your Senior Medicare Patrol (SMP) Can Help**

Your local SMP is ready to provide you with the information you need to **PROTECT** yourself from Medicare fraud, errors, and abuse; **DETECT** potential fraud, errors, and abuse; and **REPORT** your concerns. SMPs and their trained volunteers help educate and empower Medicare beneficiaries in the fight against health care fraud. Your SMP can help you with your questions, concerns, or complaints about potential fraud and abuse issues. It also can provide information and educational presentations.

To locate your state Senior Medicare Patrol (SMP): Visit [www.smpresource.org](http://www.smpresource.org) or call 1-877-808-2468.