

Do not ignore a medical bill. Ask for an itemized statement, compare it with your records, and request written terms for any payment plan or assistance. Collection and credit rules can vary.

Provider: _____

Account/reference number: _____

Date of service: _____

Amount billed: \$ _____

Insurance payment/adjustment: \$ _____

Balance shown: \$ _____

- ☐ Request an itemized bill
- ☐ Check dates and services
- ☐ Check insurance processing and explanation of benefits
- ☐ Ask about financial assistance
- ☐ Ask whether a payment plan is available
- ☐ Record who you spoke with and when

[illegible]

Written agreement

Monthly payment proposed: \$ _____

Start date: _____

Number of payments: _____

Confirmation/reference: _____

Educational worksheet from ThriftySingleMom Editorial. Adapt the worksheet to your household. Government-program rules, financial products, prices, and deadlines can change; verify current details with the relevant official agency or provider.