

Billing and Medicaid (Apple Health)

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Read this if your medical provider didn't bill Medicaid for services when you think they should have. Includes form letters you can use to try to resolve the situation.

1. Protection from billing

If you're on Medicaid, in Washington State called Apple Health (<https://www.hca.wa.gov/about-hca/programs-and-initiatives/apple-health-medicaid>), a medical provider usually can't bill you, or someone related to you, such as your family, a friend, or helper, for services. **Providers who take part in Apple Health must accept payment from the agency as payment in full**.

- A provider can't bill you for the cost of services over and above what Apple Health pays.
- A provider generally can't bill you for any service Apple Health covers even if the provider hasn't gotten payment from Apple Health or your

managed care provider.

There are exceptions to these rules. This guide discusses the exceptions. If no exception applies to you, the provider can't bill you.

If the provider tries to bill you anyway, try using one of our form letters. And try to talk to a lawyer.

2. You didn't sign

If you don't sign documents the provider gives you, such as insurance forms, billing documents, or other forms the provider needs to bill a third-party insurance carrier, the provider may bill you for the service.

3. Out-of-state services

Generally, an out-of-state provider can bill you for services. But Apple Health will pay for services you traveled to receive in these **bordering cities** the same as in-state care:

- Coeur d'Alene, Moscow, Sandpoint, Priest River, and Lewiston, Idaho.
- Portland, The Dalles, Hermiston, Hood River, Rainier, Milton-Freewater, and Astoria, Oregon.

Apple Health will also pay for emergency and non-emergency out-of-state care that meets state requirements

(<https://app.leg.wa.gov/WAC/default.aspx?cite=182-501-0180>).

4. Canadian providers

If you received services in British Columbia, Canada, the provider may be able to bill you directly. Apple Health will pay only if your situation meets other requirements. For example, you live in Point Roberts, or in a community along the Washington/British Columbia border. Or you're a member of the Canadian First Nations and live in Washington State.

Providers in other Canadian provinces can always bill you if you're on Apple Health.

5. Noncovered services

A provider can bill you for services that Medicaid doesn't cover if you agreed to pay the provider after it did all these:

1. Checked if you could get Medicaid coverage for the dates of service.
2. Checked if you had coverage under a Managed Care Organization.
3. Told you the limits of your coverage and services available to you.
4. Signed a written agreement with you. The provider generally should use this [agency form \(https://www.hca.wa.gov/assets/billers-and-providers/13_879.pdf\)](https://www.hca.wa.gov/assets/billers-and-providers/13_879.pdf).
5. Provided translation into another language if needed.
6. Did everything Medicaid or your Managed Care Organization required of it to authorize services, if coverage or authorization was available.

A provider who didn't complete the right paperwork at the right times can't bill you if Medicaid or your Managed Care Organization won't pay the provider.

If the provider should have had a written agreement with you, ask them to give you a copy. Compare the agreement you signed to what WAC 182-502-0160(5) (<https://app.leg.wa.gov/WAC/default.aspx?cite=182-502-0160>) requires. If the agreement doesn't say what it should, you can send the provider a letter explaining why they shouldn't bill you, and try to talk to a lawyer.

6. Provider doesn't take Medicaid

A provider who doesn't take Medicaid may bill you if you chose to receive their services even after they informed you that they don't contract with Medicaid, and Medicaid wouldn't pay for the services.

7. Cost sharing

If your Medicaid plan includes cost sharing, your medical provider can bill you for some costs. The provider can also bill you directly for

- Costs such as deductibles, coinsurance, or copayments.

- Services within your spend down amount, if you get Medically Needy Medicaid.

8. Managed Care Organization (MCO)

If you're in an MCO, and you go to an out-of-network provider for services, the provider can bill you if both are true:

- You knew the provider was outside your MCO's network.
- You chose to get nonemergency services from that provider anyway without the MCO's authorization.

9. Third parties

A medical provider can bill a "third party" who is legally responsible for paying any of the cost of your health care. This can be

- A person or entity that has caused you mental or physical harm.
- The insurance company covering that person or entity.
- Both.

Example: You're in a car accident. The other driver is at fault. Medicaid pays for the medical services for your injuries. It will then try to recover the cost of your medical services from the other driver or their insurance company.

You must “assign” (give) the State any right you have to payment from a liable third party for medical expenses, assistance, or residential care.

10. Dates not covered

A provider can bill you if you didn’t have Medicaid for the dates you received services. Compare the dates of services to notices you got from Apple Health, your online account, or call the number on the back of your ProviderOne card. If the provider is billing you for any dates that you had Medicaid, you can send them a letter explaining why they should stop billing you, and try to talk to a lawyer.

If you tell the provider you’re a private pay client and not getting medical assistance, the provider will bill you directly, even if you do in fact get Medicaid.

To check if you were covered by Medicaid for the dates of service, contact the Medical Assistance Customer Service Center (MACSC) (<https://www.hca.wa.gov/free-or-low-cost-health-care/contact-washington-apple-health-medicaid>).

11. Form letters

NJP Health 782 - Letter to health care provider re: Medicaid coverage: Use this if you're getting bills from a provider even though you told them at the time of service that you had Medicaid.

NJP Health 783 - Letter to collection agency re: Medicaid coverage: Use this letter to a collection agency if Medicaid covered some, but not all, of your bills, and the provider claims you signed a waiver allowing them to bill you.

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