Medical Center Hospital Patient Billing and Payment Policy Information (1/2)

IF YOU DO NOT HAVE HEALTH INSURANCE

To find out if you may be eligible for government health care programs or assistance under the hospital's charity care or discounting policies, please call the **Business Office at 432-640-1000**.

CHARITY CARE

If you are not eligible for coverage under governmental health care programs and your financial condition is such that you are not able to pay for hospital services, you may be eligible for assistance under the hospital's charity care program. To apply for charity care, you must complete a financial assistance application, provide required financial verification documents and be screened by a financial counselor to determine eligibility. If determined eligible for assistance, you may receive needed services at no charge or at a discounted amount.

DISCOUNTING POLICY FOR UNINSURED PATIENTS

The hospital provides a 72% discount off the total bill for hospital services if you are uninsured and do not qualify for coverage under government health care programs or for charity care under the hospital's charity care policy. The discount applies only to the bill for hospital services, and NOT to any doctor or professional bills related to this care.

IF YOU HAVE HEALTH INSURANCE

Depending on your health insurance coverage, you may be personally responsible for payment for hospital services and for services provided by your doctor or other health care providers. Please contact your health plan to confirm benefit coverage, deductibles, co-payments, co-insurance, and other plan provisions that may impact your responsibility for payment.

INTEREST CHARGES

If you are personally responsible for payment for all or a part of the bill for hospital services and you are not able to pay the amount due within 30 days, please call the **Business Office at 432-640-1000** for information on payment plans and the amount of interest that may be charged on the amount due.

Medical Center Hospital Patient Billing and Payment Policy Information (2/2)

DISCLOSURE OF PARTICIPATION IN HEALTH PLAN NETWORK

You have the right to request a written disclosure at the time you are first admitted to or treated that provides confirmation whether the hospital is a participating provider under your health plan. If you receive services in the emergency department or are admitted on an emergency basis, you will receive a written disclosure concerning the hospital's participation in your health plan before you are discharged. Some facility-based doctors at the hospital, such as, emergency room doctors and anesthesiologists, and other healthcare providers may not be in the same health plan network as the hospital and may not be in your health plan's network. This may result in more out-of-pocket expenses for you. You may request a listing of facility-based doctors who practice at the hospital. Please call the **Business Office at 432-640-1000** to request this listing. You also may request information from these doctors on whether they have a contract with your health plan and under what circumstances you may be responsible for payment of any amounts not paid by your health plan. Pease contact your health plan to verify if the doctors or other healthcare providers who will be treating you are in the plan's network.

RECEIVING SEPARATE OR ADDITONAL BILLS

You can expect to receive a bill from the hospital as well as separate bills from various doctors and other health care providers for their professional services. Usually, more than one doctor will care for you at the hospital and you may receive several doctor bills (attending doctor, surgeon, radiologist, pathologist, etc.).

REQUESTING ESTIMATED CHARGES FOR SERVICES

The hospital will provide you with an estimate of hospital charges for any elective inpatient admission or non-emergency outpatient surgical procedure or other service on request before the scheduling of the admission/service. The estimate will be provided within (10) business days of the request. Please call the **Business Office at 432-640-1000** to request an estimate.

REQUESTING ITEMIZED BILLING STATEMENT

You have the right to receive a free copy of your itemized billing statement of hospital charges for services if the request is made within one year from the date of discharge from the hospital. Once requested, you will receive an itemized bill within 10 business days. Please call the Business Office at 432-640-1000 to request a statement.

PATIENT COMPLAINTS

If you have questions or concerns about hospital charges for services or care received at the hospital, please call the Patient Experience Office at 432-640-2293 for assistance. If your complaint cannot be resolved informally at the hospital, you may file a complaint with the Texas Department of State Health Services by phone at 1-886-973-0022 or by mail to Health Facility Compliance Group (MC 1979), Texas Department of State Health Services, P.O. Box 149347, Austin, TX 78714-9347.



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