

A Word About Doctor's Bills

Riverside's hospital bills *do not* include fees for any physician services, including but not limited to the Emergency Room Physician, Radiologist, Pathologist, and Anesthesiologist. You may receive additional bills from physicians who helped with your care while you were a patient. Some of these physicians may not be participating providers in the same insurance plans and networks as the hospital, which may result in the patient having a greater financial responsibility for the services provided by these health care professionals. Questions about coverage or benefit levels should be directed to your insurance plan. If you have questions regarding any of your physician bills, please call the telephone number printed on the physician's bill.

Tips for Medicare Recipients

If you are Medicare-eligible and are scheduled for outpatient services, please bring your physician's order and diagnosis with you, or be sure that your physician has faxed it to the hospital prior to your arrival. If Medicare does not cover the services ordered, you may be asked to sign a Medicare Advance Beneficiary Notice (ABN) to signify that you have been informed of your payment responsibility. There are items/services that Medicare never pays and an ABN may not be issued. Please refer to your Medicare handbook or contact us at the telephone number listed on your bill.

The Senior Advantage program offers financial counseling services to assist with Medicare claims, supplemental insurance and other issues especially for seniors. Call 815-935-7488.

Frequently Asked Questions

More frequently asked questions are available on our website at www.RiversideMC.net.

How do I know if Riverside is contracted with my health plan?

To receive full insurance benefits, some health plans

require patients to receive services at an "in-network" or "participating provider" hospital. Please call your health plan to verify its requirements and to be sure Riverside is in the network.

What if Riverside is "out of network", can I still go there?

In an emergency you should go to the closest hospital. Your health plan will generally cover these costs or transfer you to an "in-network" hospital if it is safe to do so. If you elect to go to an "out of network" hospital in a non-emergency, you may be required to pay a larger deductible or a greater portion of your bill. Be sure you understand your "out of network" options with your health plan.

How can I be sure my health plan will pay my hospital bills?

Some health plans require a patient to pre-certify certain services, or to notify them within a certain period of time after becoming hospitalized. If your hospitalization is not an emergency, we encourage you to review and understand your insurance card and benefit documents your health plan or employer has provided you. (On elective procedures you should talk to your doctor's office and your health plan about coverage.) Please discuss any insurance eligibility or payment concerns with a Riverside associate at the time of registration, or with a financial counselor as soon as possible.

How will I know how much I owe?

Your health plan will send you an "Explanation of Benefits" notice which provided the amount it has paid, any non-covered or denial amounts and the remaining balance that you owe. Please review this carefully and call your health plan or the hospital immediately if you have questions or concerns. The hospital will also send you a bill for any remaining amount due (co-insurance, deductible, non-covered charges). Many health plans have an out of pocket or deductible amount that the patient must pay. You may be asked to pay a deposit at registration or discharge from the hospital.

What if I don't have health insurance?

Be assured that emergency service will never be delayed or withheld on the basis of a patient's ability to pay. If you do not have health insurance, please call a hospital financial counselor at the number indicated below. The financial counselor will review payment and funding options that maybe available to you. These could include applying for Illinois Medicaid, All Kids or Family Care programs, Illinois Crime Victims Funds, interest free payment plans and charity care consideration. Should you need further assistance, please contact a financial counselor at 815-935-7539 or visit our website at www.RiversideMC.net.

Responsibility of Bills for Children of Divorced or Separated Parents

Under federal and state laws, both father and mother are responsible for the medical necessities of their dependent children, regardless of any separation or divorce agreements. Therefore, Riverside Medical Center observes the following guidelines.

- The parent who requests the service for a child will be considered financially responsible for services rendered, regardless of any separation or divorce agreement.
- If someone other than the child's parent requests the service for a child, the parent who has custody will be considered financially responsible for payment of services provided.
- As a courtesy to both parents, when requested, Riverside will bill insurance plans of either or both parents. If signatures or additional insurance information is required, the parent considered financially responsible for payment for services will be required to obtain and furnish the needed information.
- We will assist you in filing insurance claims and providing duplicate copies of invoices, as needed.
- Riverside will not act as an arbitrator for a separation or divorce settlement with respect to determining responsibility for payment of hospital bills.

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Understanding Hospital Bills and Health Insurance Claims

Patient responsibilities and helpful hints for assistance

 **RIVERSIDE**
Medical Center

350 N. Wall Street
Kankakee, Illinois 60901

 RUSH
RUSH SYSTEM FOR HEALTH
www.RiversideMC.net

Thank you for choosing the hospital and physicians of Riverside Medical Center as your provider.

Life is a remarkable journey. Health impacts every step - how we connect with others, how we express our potential, how we pursue our dreams. At Riverside, our mission is to provide healthcare experiences that are just as remarkable. We do this for each and every person, regardless of social or economical circumstances. We offer our highest thinking, our kindest touch, and our strongest commitment to excellence.

We understand that hospital bills and health insurance claims can be confusing. With that in mind, we have created this brochure to help you better understand billing issues.

We will try to help you understand what our hospital billing associates can do to assist you, how you can assist us and your health plan and how we can help you with your application for qualifying for government or financial assistance programs.

Please also visit our website at www.RiversideMC.net.

What Riverside will do for you.

- **Riverside will bill your health plan on your behalf**, including Medicare and Medicaid, for payment of hospital services. If you have more than one health plan, Riverside will bill additional carriers.
- **You will receive easy-to-read, statements** showing the most current balance owed by your health plan or due from you. Riverside will send you a statement after your health plan has paid to notify you of any remaining balance owed.
- **You will have access to a financial counselor** to answer billing questions or assist you with payment issues. Counselors can assist you or family members with questions concerning insurance benefits, hospital charges, payment options and applying for financial assistance programs.

A counselor can also help you determine if you qualify for Riverside's own financial assistance program which can help uninsured or underinsured patients earning up to 300 percent of the federal poverty level. For more information on federal poverty levels go to www.hhs.gov.
- **You will have access to a financial counselor who speaks your language.** If we can not provide a counselor who speaks your language on your request, we will be happy to arrange translation assistance.
- **You will be treated with dignity and respect.** At Riverside Medical Center all patients will be treated with dignity and respect, regardless of your ability to pay.

Your billing responsibilities. What you can do to help us.

- **Riverside requests that you provide us with complete health insurance information upon registration.** This includes presenting a driver's license or ID, all insurance cards and authorization. If you have been at Riverside Medical Center before, please inform us if your personal information or insurance has changed since your last visit. We will ask you to authorize release of information and assign insurance benefits to the hospital.
- **Please understand and comply with the requirements of your health plan** by knowing your benefits, obtaining proper authorizations for services, submitting referral or claim forms or completing a coordination of benefits form as your health plan may require. If you are scheduled for outpatient services, please bring your physician's order and diagnosis with you, or be sure your physician has faxed it to the hospital prior to your arrival. (Medicare recipients see "Tips for Medicare Recipients")
- **Please respond promptly to requests you receive from your health plan.** While we will attempt to provide all information and paperwork to your health plans, sometimes they require a response from you to resolve issues related to your account or insurance coverage. If your health plan has not made payment within a reasonable period of time (usually 30 days after billing) and has not responded to our attempts to resolve payment on your behalf, the balance owed may become your responsibility.
- **Please call us if you have any questions or concerns about a bill.** The best number to call is always the number on the bill you are inquiring about. Your physician may have ordered tests or procedures that your health plan does not cover. In these cases, check your health policy plan handbook or call the telephone number on your insurance card for more information.
- **Please make timely payments on your portion of the bill.** Payment for your hospital bill is ultimately your responsibility, with the exception of approved Medicare, Medicaid, CHAMPUS and HMO services. You may be asked to pay at the time of service or prior to discharge if you have a deductible, co-insurance or other self-pay amount due, or do not have insurance coverage for your hospital services. For your convenience, Riverside Medical Center accepts: cash, personal check, debit card or money orders, Visa, MasterCard, American Express, and Discover credit cards. Interest free payment options are also available.
- **Please let us know if you anticipate problems paying your portion of the bill.** As a not-for-profit organization we are happy to assist those in need. If you are having financial difficulties, please let us know. A financial counselor can discuss payment alternatives that may be available to you, including extended payments, government programs or charity care considerations. To apply for government or hospital financial assistance programs, certain personal and financial information is required. To reach a financial counselor to learn more, call 815-935-7539 or visit our website at www.RiversideMC.net.
- **Please help us determine whether you qualify for third-party payment of all or a portion of your bill.** If you lack financial resources to pay all or a portion of your bill, you may be asked to assist Riverside in making an application for financial assistance to Illinois Medicaid, All Kids, or Family Care. If your hospitalization results from an accident for which a third-party bears responsibility, you may be asked to provide information about possible indemnity payments. Riverside asks for your cooperation in providing any information and other assistance requested to permit these resources to be used to pay your bill, as appropriate.