

## Financial Assistance for Your Hospital Bill

Dignity Health's Financial Assistance Policy describes the financial assistance programs available to uninsured or underinsured patients who meet certain income requirements to help pay for medically necessary hospital services provided by Dignity Health. An uninsured patient is someone who does not have health coverage, whether through private insurance or a government program, and who does not have the right to be reimbursed by anyone else for their hospital bills. An underinsured patient is someone who has health coverage, but who has large hospital bills that are not fully covered by their insurance.

If you are worried that you may not be able to pay your hospital bill, Dignity Health offers discounted care, interest-free payment plans, or free care depending on your financial circumstances and the care you received. A member of our Patient Financial Services team can help determine whether you qualify for financial assistance and can guide you through our application process.

## Government Program Eligibility

To get more information on government-sponsored programs like Medi-Cal, Medicaid, Medicare, and Healthy Families, please visit **[www.healthcare.gov](http://www.healthcare.gov)**. Financial Counselors are also available at each Dignity Health hospital to assist you.

## Our Mission

Dignity Health is committed to furthering the healing ministry of Jesus. We dedicate our resources to:

- Delivering compassionate, high-quality, affordable health services;
- Serving and advocating for our sisters and brothers who are poor and disenfranchised; and
- Partnering with others in the community to improve the quality of life.

## Our Commitment to You

Our Patient Financial Services team is here to help you understand your bill and the financial assistance options that may be available to you. If you are unable to pay your bill, or would like to set up a payment plan, please contact us.

# Understanding Your Hospital Bill

# And Financial Assistance Options Available to You

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## Understanding Your Bill

The bill you receive from Dignity Health will reflect the charges associated with your hospital stay (for example: your room, procedures, exams, nursing care, and medication). Our Patient Financial Services team can provide you with an estimate of what your charges might be in advance of receiving care. You may also request an itemized billing statement after you leave the hospital by calling Patient Financial Services.

Please **call** the number printed on your statement if you have any questions about your account.

This is a **summary** of your charges and any payments or adjustments made.

This is your **personal account number**, please have it available when calling regarding your account.



14141 Southwest Freeway Suite 300 | Sugar Land TX 77478

**Statement of Services**

For help with billing questions, please call:  
(888) 555-5555  
Office Hours: M-TH 7:00am-10:00pm, F 7:00am-6:00pm, S-S 8:00am-4:00pm

**Addressee**

DOE TEST  
123 MAIN ST APT G  
SCHENECTADY NY 12345-0001

**Online Bill Pay**

Make a quick and easy payment online with your checking account.  
[dignityhealth.org/billpay](http://dignityhealth.org/billpay)

WID Number	Due Date	Amount Due	Amount Paid
K41362004	06/03/2019	\$500.00	\$

**Please make checks payable and remit to:**

Dignity Health  
3400 Data Drive  
Rancho Cordova CA 95670

myEasyMatch Code: 6YT-VNJ-NSM Please detach and return top portion with payment.

WID Number	Guarantor Name	Statement Date	Due Date
K41362004	DOE TEST	05/13/2019	06/03/2019

Date	Service Description	Charges	Payments/ Adjustments	Patient Balance
10/04/2008	DOE TEST Loc: Dignity Health Account #: 1875581X1 Insurance Payments/Adjustments Patient Payments/Adjustments <b>Patient Balance</b>	\$1,500.00	-\$750.00 -\$250.00	<b>\$500.00</b>
<p><b>Dignity Health's Financial Assistance Policy:</b></p> <p>If you need help paying your bill, you may qualify for financial assistance, including free care, a discount, or a payment plan under Dignity Health's Financial Assistance Policy. For additional information about Dignity Health's Financial Assistance Policy, please see the reverse side of this bill.</p>				

**Self-service Payment Plans**

You can now set up and manage self-service payment plans online!  
[dignityhealth.org/billpay](http://dignityhealth.org/billpay)

**mySecureBill**

Sign-up for eStatements, text notifications, eWallet, and more! [dignityhealth.org/billpay](http://dignityhealth.org/billpay)

**AMOUNT DUE: \$500.00**

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## Paying Your Bill

If you have provided us with your insurance information, we will submit a claim on your behalf. When the amount you owe has been determined by the hospital or insurance company we will send you a "Balance Due" notice, like the one printed to the left.

## Ways to Pay

Online: [www.dignityhealth.org/billpay](http://www.dignityhealth.org/billpay)

By Phone: by calling the number listed on your billing statement like the one printed to the left

In Person: Visit your Dignity Health hospital

We accept cash, credit cards, money orders, cashier's check or personal check as payment.

## Other Bills You May Receive

You may receive additional bills from doctors or specialists who assisted in your care. This could include emergency physicians, anesthesiologists, radiologists, home health, hospice, and/or pathologists. These doctors are licensed to treat patients here, but they are not directly employed by the hospital, so they bill separately. To better understand the bills you may receive from your doctors, or to inquire about Financial Assistance for them, please call their offices directly.

This is your **WID #**. Please use it when using the automated telephone system.

This **balance** is due and payable upon receipt of your statement.