

ST. JOSEPH CREDIT POLICY

- Financial arrangements must be made before or at discharge.
- It is the guarantor's responsibility to make appropriate arrangements with a credit representative from the Medical Center's Business Office.
- Those with scheduled admissions, including surgeries and obstetrical deliveries, need to make financial arrangements prior to admission.
- If the bill cannot be paid in full at the time of discharge, credit may be extended through one of our financial plans.

FINANCIAL ARRANGEMENTS **30-60-90 PLAN**

- This 30-60-90 plan requires a 25% deposit upon admission. Thereafter any balance owing requires another 25% payment at 30 days, 25% at 60 days with the balance to be paid in full at 90 days.

BANK NOTE PROGRAM

For accounts that cannot be paid within 90 days, the Medical Center has arranged a bank note program. This program provides:

- Loans for payment of Medical Center bills at competitive interest rates with minimal paper work.
- Payment terms in some cases may be extended as far as 60 months to keep monthly payments at a minimum.
- Loans through the bank program provide you an opportunity to establish or re-establish credit.
- Application forms can be obtained at the Medical Center's business office or by calling one of the numbers listed on the back of this brochure.

SPECIAL ARRANGEMENTS

- You may qualify for financial assistance.
- Special financial arrangements are possible for individuals who cannot meet the minimum payments prescribed in the above plans. In order to determine an appropriate payment plan, you need to complete a Medical Center Financial Assistance Application.

■ A Patient Assistance Representative is available to all patients to help obtain financial assistance through various Financial Assistance programs.

Please contact the Business Office within 10 days of service for a Financial Assistance Application.

INSURANCE INFORMATION

PERSONAL

- The Medical Center will bill your insurance company if the proper identification card and claim forms are provided.
- If you are insured through a Managed Care plan, it is your responsibility to obtain any required approval, authorization or referral from your Primary Care Physician prior to receiving services at the Medical Center.
- During admission you will be asked to sign a form authorizing your insurance company to assign insurance benefits to the Medical Center.
- You are expected to pay for any charges that are not covered by insurance. If your insurance company has not paid your claim within 60 days after billing, then you become responsible for the total bill.
- Questions regarding insurance coverage or benefits should be directed to your insurance company.

MEDICARE

St. Joseph Regional Medical Center will bill Medicare for your inpatient stay or outpatient visit. In addition, we will be happy to bill your Medicare supplemental policy.

GOVERNMENT MEDICAL ASSISTANCE - MEDICAID

If you are a recipient of any type of governmental medical assistance, please notify the Medical Center as to which government agency is to be billed. You need to present your coupon or card during the admission process.

WORKMEN'S COMPENSATION **INDUSTRIAL CLAIMS**

If the services we provide are the result of a work related injury, we will need:

- the name of your employer,
- your social security number, *and*
- date of injury.

You must also notify your employer of any on-the-job injury. If you work for a Washington employer, you will need to complete an accident report.

Only Idaho and Washington industrial insurance payments are accepted as payment in full. If your industrial injury is based with another state, any balance not paid by that state's industrial carrier will be billed to you.

AUTO INSURANCE

For bills involving auto insurance, we need to know who is at fault, and the name, address, and phone number of the responsible insurance company. If it takes an excessive amount of time to obtain a settlement, the Medical Center will look to you personally for payment.

CREDIT CARDS

The Medical Center accepts MasterCard, VISA, Discover and AmericanExpress cards as payment for your hospital services.

FINANCE CHARGE

A Finance Charge will begin accruing on accounts not covered by insurance 60 days after the first billing. If your account is pending payment by insurance, the Finance Charge will begin accruing on the self pay balance 60 days after insurance pays. If your insurance company does not pay within 60 days after billing, the account will be considered a self-pay account, and interest will begin accruing on the full balance 60 days later.

The effective interest rate will be 1½ % per month, which corresponds to an annual Percentage Rate of 18%. The Finance Charge will be figured by applying the monthly interest rate to the Adjusted Account Balance (previous balance minus current payments and credits plus any new charges). The minimum finance charge for any balance is \$.50.