

AREA CODE: 641

Administration 444-5620

Cardiac Rehab 444-5671

Clinic Appointment Scheduling

(Brindle & Loux) 444-5641

(Woodhouse & Christ) 444-5632

Dietary Manager 444-5684

Hospital Line 444-3223

Hospital Nurse's Station 444-5661

Human Resources 444-5624

Lab 444-5656

Medical Records 444-5646

PT/OT/Speech Therapy 444-4273

Radiology 444-5658

Respiratory Therapy 444-5671

**Business
Office**

AREA CODE: 641

Business Office Manager

444-5625

Patient Accounts Representative

444-5631

Medicare Billing Specialist

444-5629

Commercial Billing Specialist

444-5674

Blue Cross and

Medicaid Billing Specialist

444-5630

**Belmond
Medical**
CENTER

Belmond Medical Center

Centering Health Care Around You

**Financial
Responsibility
and your
Medical Bill**

**Belmond
Medical**
CENTER

Our Commitment to You

Welcome to Belmond Medical Center (BMC). We appreciate the trust you have placed in our organization, physicians and staff by choosing us for your healthcare needs. We are committed to providing you with quality healthcare services while fulfilling our mission of promoting the well being of people by serving with compassion, respect, excellence and stewardship.

Registration at Belmond Medical Center

Hospital

Before receiving services at Belmond Medical Center (BMC), you will be asked to register at the Registration Desk located in the clinic. You will need to bring all your insurance cards (including Medicare and Medicaid) and a photo identification. The receptionist will collect the information needed for billing and ask you to sign one or more forms depending on the service you will be receiving.

Clinic

Clinic registration is at the same area as hospital registration. You will need to bring all of your insurance cards and a photo identification. Occasionally you will be asked to update your patient history or information. If you are coming for a regular check-up, we also request you bring all your medications in their original containers.

Hospital and Outpatient Pre-Certification

It is recommended that you call your insurance company before having a hospital or outpatient procedure. Many insurance companies require pre-certification **before** you receive treatment in order for them to pay your bill. Inpatient admissions require pre-certification. Since all insurance companies requirements vary, **it is your responsibility to know your coverage and follow their procedures.**

Billing Services

The hospital or clinic bill may not be the only bill you receive. Services provided by other professionals, i.e.: the surgeons, specialty clinics, lab or pathology will be billed separately by their office. Each of these bills will indicate an address that your payment should be mailed to. Also, physician and lab charges may be billed through the hospital or clinic depending on the service provided.

Filing Insurance

ER

If you do not have insurance our expectation would be that you pay \$50.00. If you have insurance and have an emergency room co-pay, our expectation would be that you pay your co-pay at time of service.

Hospital

After your hospital service or test, we will file your insurance for you. Itemized bills are available upon request. Upon receipt of payment from your insurance, you will be notified on any balance due by receiving our monthly statement. If the amount is over \$100.00, we offer a prompt pay discount of 15% if paid in full. If you do not have insurance, our expectation is that you meet with a Patient Account Representative to make payment arrangements.

Clinic

Our expectation is that you will be prepared to pay your co-payment at the time of service. We will also file your clinic charges with your insurance carrier. If you do not have insurance, a minimum payment of \$25.00 is expected at the time of service. Balances remaining will be billed on your next monthly statement. We do offer a 30% discount if no insurance and payment is made in full at time of service or if paid in full within 30 days of first statement.

What If My Insurance Carrier Doesn't Respond?

If we do not hear from your insurance carrier after 60 days from your date of service, your bill will be sent to you for payment or to follow up with your insurance carrier. If you need assistance, please call one of our billing specialists listed in this pamphlet.

Why Doesn't Insurance Pay the Entire Bill?

Insurance companies can require you to pay co-pays, deductibles and non-covered items. Therefore, after receiving payment from your insurance company, there may be a balance sent to you for payment. At BMC, we accept assignment on Medicare, which means you will not be charged for the balance except for non-covered items, co-pays, and deductibles. BMC also works with various preferred provider organizations (PPO's) that are allowed discounts for large group coverage. Your bill might reflect these discounts.

Payment

After we receive payment from your insurance company, any balance due will be billed to you. Your statement will reflect the total amount due from you at the time the statement was printed. If amount is over \$100.00, we offer a prompt pay discount of 15% if paid in full. We accept cash, check, and credit cards as payment. If for some reason you are unable to pay the balance due, please contact patient accounts regarding payment arrangements.

Financial Responsibility Rests with You

Financial responsibility for services obtained at BMC rests with the patient/family regardless of insurance coverage. We will process your insurance claims, provide this pamphlet and any other additional information to help guide you through the billing process at BMC.

Customer Satisfaction

Thank you for choosing Belmond Medical Center for your healthcare needs. We value your relationship with us and will make every attempt to honor that relationship by providing the quality treatment you require and deserve. If you have concerns related to your services or your quality of care at BMC, please contact administration.