NOTICE TO OUR PATIENTS

**About your bill and our billing procedures**

(Provider Based Facility Name) is a part of (Hospital Name), an Intermountain Healthcare facility. As a part of (Hospital Name) we are able to offer the highest quality care and treatment using the latest technology. Even if you are not visiting the main hospital building, the hospital will be providing services for you.

Your doctor (or other health care professionals such as physician assistants, therapists, etc.) will also provide health care services. Services from the hospital are charged separately from doctors, so you will likely receive two charges for your care:

* One charge will be from the hospital. This charge will be for hospital services including nursing services, supplies, and tests such as x-rays or lab tests, etc. If you have health insurance, your coverage for hospital benefits will be applied to these hospital charges. This often means that will pay your yearly deductible(s), and a coinsurance amount that is generally a percentage of the total hospital charges.
* Another charge will come from your doctor (or other health care professional) for the services they provide. Generally insurance plans require a co-payment for doctor’s services.
* Because of these two separate charges, you may be asked to register twice and to pay separately for the estimated amounts that you will owe. We will make this process as convenient as possible for you.
* If (Provider Based Facility Name) was not a part of the Hospital you would be charged differently.

# Medicare patients

We estimate that you will owe, $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ after your annual deductible has been paid. This estimate is based on the average hospital charges for this hospital department and your Medicare coverage. The actual amount you owe may be higher, depending on the services provided at the time of your visit. This amount is for your hospital services only.

In addition to this amount for the hospital, a co-payment for the doctor’s services will be requested on the date of your visit.

# You matter to us

Insurance coverage and payment can be confusing. If you have any questions please discuss them with a member of our office staff. If you are unable to pay your portion of the bill, please let us know. Financial assistance may be available.

***Non Discrimination Statement***

Intermountain Healthcare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

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