



HELP PAYING YOUR BILL

COMMONSPIRIT HEALTH Plain Language Summary of Financial Assistance

Dignity Health, an affiliate of CommonSpirit Health, is dedicated to creating healthier communities by providing financial assistance to persons who have health care needs and are uninsured, underinsured, ineligible for a government program, or otherwise unable to pay. CommonSpirit 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 CommonSpirit Health Hospitals. 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.

Free Care

- If you are uninsured or underinsured with a family income of up to 250% of the Federal Poverty Level, you may be eligible to receive hospital services at no cost to you.

Discounted Care

- If you are uninsured or underinsured with an annual family income between 250-400% of the Federal Poverty level, you may be eligible to have your bills for hospital services reduced to the highest amount reasonably expected to be paid by a government payer, which is usually the amount that Medicare would pay for the same services.
- If you are uninsured or underinsured with an annual family income between 401-500% of the Federal Poverty level, you may be eligible to have your bills for hospital services reduced to the Amount Generally Billed (AGB), which is an amount set under federal law that reflects the amount that would have been paid to the hospital by private health insurers and Medicare (including co-pays and deductibles) for the medically necessary services.

Assistance is offered to those whose annual family income falls within the categories above and have:

- An account balance totaling ten (\$10.00) dollars or more; and
- Completed a Financial Assistance Application and provided supporting documentation to verify income.

NOTE: In some cases, patients may be awarded financial assistance without a formal application. Details are outlined in the Financial Assistance Policy.

If you are eligible for financial assistance under our Financial Assistance Policy, you will not be required to pay more than the Amount Generally Billed described above. If you qualify, you may also request an interest-free extended payment plan.

You will never be required to make advance payment or other payment arrangements in order to receive emergency services.



How to Apply

Free copies of the hospital's Financial Assistance Policy and financial assistance application forms are available online at your hospital's website listed on the next page or at the hospital Admitting areas located near the main entrance. (Follow the signs to "Admitting" or "Registration"). Free copies of these documents can also be mailed to you upon request if you call Patient Financial Services at the telephone number listed below for your hospital.

Traducción disponible: You may also obtain Spanish and other language translations of these documents, for free, at your hospital's website, in your hospital's Admitting area, or by calling your hospital's telephone number.

CommonSpirit Health Financial Counselors are available to answer questions, provide information about our Financial Assistance Policy and help guide you through the financial assistance application process. Financial counselors can also provide you with information regarding the Hospital Facility's AGB percentage and how the AGB percentages were calculated. Our staff is located in the hospital's Admitting area and can be reached at the telephone number listed below for your hospital.

Additionally, there are independent organizations that can help you understand the billing and payment process and provide you with information regarding Covered California and Medi-Cal presumptive eligibility. Please visit the Health Consumer Alliance at <https://healthconsumer.org> for more information.

All Dignity Health hospitals provide pricing information for our most sought-after services. You can find that pricing information at <https://dignity.msph.recondohealth.net/>.

Finally, we may refer some delinquent accounts to third-party debt collection agencies. State and federal law require debt collectors to treat you fairly and prohibit debt collectors from making false statements or threats of violence, using obscene or profane language, and making improper communications with third parties, including your employer. Except under unusual circumstances, debt collectors may not contact you before 8:00 a.m. or after 9:00 p.m. In general, a debt collector may not give information about your debt to another person, other than your attorney or spouse. A debt collector may contact another person to confirm your location or to enforce a judgment. For more information about debt collection activities, you may contact the Federal Trade Commission by telephone at 1-877- FTC-HELP (382-4357) or online at www.ftc.gov.



MORE HELP California Hospital Fair Billing Program

Help Paying Your Bill

There are free consumer advocacy organizations that will help you understand the billing and payment process. You may call the Health Consumer Alliance at 888-804-3536 or go to healthconsumer.org for more information.

Hospital Bill Complaint Program

The Hospital Bill Complaint Program is a state program, which reviews hospital decisions about whether you qualify for help paying your hospital bill. If you believe you were wrongly denied financial assistance, you may file a complaint with the Hospital Bill Complaint Program. Go to HospitalBillComplaintProgram.hcai.ca.gov for more information and to file a complaint.

ATTENTION:

If you need help in your language, please call the phone number below or visit the financial counselor office. The office is open 8am-4:30pm and located at the hospital address shown below. Aids and services for people with disabilities, like documents in braille, large print, audio, and other accessible electronic formats are also available. These services are free and can be accessed by in-person request or by calling either of the hospital's telephone numbers listed below.

St. Bernardine Medical Center

St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404 |
Financial Counseling (909) 883-8711 ext 14408
Patient Financial Services 888-488-7667 | www.dignityhealth.org/saintfrancis/paymenthelp

ՈՒԾԱԴՐՈՒԹՅՈՒՆ.

Եթե ձեր լեզվի հետ կապված օգնության կարիք ունեք, խնդրում ենք զանգահարել (909) 883-8711 ext 14408 կամ այցելել ֆինանսական խորհրդատուի գրասենյակը: Գրասենյակը բաց է՝ 8am-4:30pm և գտնվում է St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404: Հասանելի են նաև օժանդակ միջոցներ և ծառայություններ հաշմանդամություն ունեցող անձանց համար, ինչպիսիք են Բրայլի լեզվով փաստաթղթերը, խոշոր տառատեսակը, առլիդն և այլ մատչելի էլեկտրոնային ձևաչափերը: Այս ծառայությունները անվճար են:

ВНИМАНИЕ:

Если вам нужна помощь на вашем языке, пожалуйста позвони (909) 883-8711 ext 14408, или посетите офис финансового консультанта. Наш офис работает с 8ам до 4:30 pm и расположен в St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404. Также доступны вспомогательные средства и услуги для лиц с инвалидностью, например, документы, напечатанные шрифтом Брайля, крупным шрифтом, в аудио- и других доступных электронных форматах. Эти услуги являются бесплатными.



注意：

如果您需要您语言的帮助, 请致电, (909) 883-8711 ext 14408 或亲临财务顾问办公室。办公室已开放8:00 - 下午 4:30, 并位于 St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404。残障人士还可获得辅助工具和服务·如盲文文件、大字文件、音频文件以及其他无障碍电子格式资料。此类服务均 免费。

주의 사항:

귀하의 언어로 도움이 필요하시면 전화주세요, (909) 883-8711 ext 14408. 또는 금융상담실을 방문하. 세요사무실은 오전 8시부터 오후 4시 30분까지 열려있습니다 그리고 위치는 St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404. 점자, 큰 활자, 오디오 및 기타 접근 가능한 전자 형식의 문서와 같은 장애인을 위한 지원 및 서비스도 제공됩니다. 이러한 서비스는 무료입니다.

UA TIB ZOO MLOOG:

Yog koj xav tau kev pab ua koj hom lus, thov hu rau (909) 883-8711 ext 14408 los yog mus ntsib tus kws pab tswy yim txog nyiaj txiag. Lub chaw ua haujlwm qhib 8 teev sawv ntxov-4:30 teev tsaus ntuj thiab nyob ntawm St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404. Cov kev pab thiab cov kev pab cuam rau cov neeg xiam oob qhab, xws li cov ntaub ntawv nyob rau hauv daim ntawv Braille, luam ntawv loj, suab, thiab lwm yam khoom siv hluav taws xob siv tau kuj muaj. Cov kev pabcuam no pub dawb.

LƯU Ý:

Nếu quý vị cần trợ giúp bằng ngôn ngữ của mình, vui lòng gọi (909) 883-8711 ext 14408 hoặc đến văn phòng tư vấn tài chính. Văn phòng mở cửa từ 8 giờ sáng - 4 giờ 30 chiều và tọa lạc tại St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404. Các hỗ trợ và dịch vụ dành cho người khuyết tật, như tài liệu bằng chữ nổi, chữ in lớn, âm thanh và các định dạng điện tử dễ tiếp cận khác cũng có sẵn. Những dịch vụ này là miễn phí.

ATTENTION:

Si vous avez besoin d'aide dans votre langue, veuillez appeler (909) 883-8711 ext 14408 ou visitez le bureau du conseiller financier. Le bureau est ouvert de 8h à 16h30 et situé au St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404. Des aides et des services pour les personnes handicapées, comme des documents en braille, en gros caractères, audio et autres formats électroniques accessibles, sont également disponibles. Ces services sont gratuits.

注意 :

如果您需要您語言的協助，請致電 (909) 883-8711 ext 14408，或前往財務顧問辦公室。辦公室的開放時間為上午 8 點至下午 4:30，地址為 St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404。也為殘疾人士提供輔助工具和服務，例如點字、大字體、音訊和其他無障礙電子格式的文件。這些服務是免費的。

ACHTUNG:

Wenn Sie Hilfe in Ihrer Sprache benötigen, rufen Sie bitte an (909) 883-8711 ext 14408 oder besuchen Sie die Finanzberatungsstell. Das Büro ist von 8:00 bis 16:30 Uhr geöffnet und befindet sich unter: St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404. Es stehen auch Hilfsmittel und Dienstleistungen für Menschen mit Behinderungen zur Verfügung, z. B. Dokumente in Blindenschrift, Großdruck, Audio und anderen barrierefreien elektronischen Formaten. Diese Dienste sind kostenlos.

ATENCIÓN:

Si necesita ayuda en su idioma, llame (909) 883-8711 ext 14408 o visite la oficina del asesor financiero. La oficina está abierta de 8 am a 4:30 pm y está ubicada en St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404. También se encuentran disponibles ayudas y servicios para personas con discapacidades, como documentos en braille, letra grande, audio y otros formatos electrónicos accesibles. Estos servicios son gratuitos.

ご注意 :

あなたの言語でサポートが必要な場合は、お電話ください (909) 883-8711 ext 14408 または家計相談室までお越しください。オフィスの営業時間は午前 8 時から午後 4 時 30 分までで、所在地は次のとおりです St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404. 点字、大きな活字、音声、その他のアクセス可能な電子形式の文書など、障害のある人向けの支援やサービスも利用できます。これらのサービスは無料です。

ध्यान दें:

यदि आपको अपनी भाषा में सहायता चाहिए तो कृपया कॉल करें (909) 883-8711 ext 14408 या वित्तीय परामर्शदाता कार्यालय पर जाएँ। कार्यालय सुबह 8 बजे से शाम 4:30 बजे तक खुला रहता है St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404. विकलांग लोगों के लिए सहायता और सेवाएँ, जैसे ब्रेल में दस्तावेज़, बड़े प्रिंट, ऑडियो और अन्य सुलभ इलेक्ट्रॉनिक प्रारूप भी उपलब्ध हैं। ये सेवाएँ निःशुल्क हैं।



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أو زيارة مكتب المستشار المالي. إذا كنت بحاجة إلى تلقي المساعدة بلغتك، يرجى الاتصال على St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404. المكتوبة بطريقه برail والطباعة الكبيرة والصوت وغيرها من التنسيرات الإلكترونية التي يمكن الوصول إليها. هذه الخدمات مجانية.

ਪਿਆਨ ਦਿਓ:

ਜੇ ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਮਦਦ ਦੀ ਲੋੜ ਹੈ, ਕਿਰਪਾ ਕਰਕੇ (909) 883-8711 ext 14408' ਤੇ ਕਾਲ ਕਰੋ ਜਾਂ ਵਿੱਤੀ ਕਾਉਂਸਲਰ ਦਫਤਰ 'ਤੇ ਵਿਜ਼ਿਟ ਕਰੋ। ਦਫਤਰ ਸਵੇਰੇ 8 ਵਜੇ ਤੋਂ ਸ਼ਾਮ 4:30 ਵਜੇ ਤਕ ਖੁੱਲ੍ਹਾ ਹੈ ਅਤੇ St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404 'ਤੇ ਸਥਿਤ ਹੈ। ਅਯੋਗ ਲੋਕਾਂ ਲਈ ਸਹਾਇਕ-ਸਾਧਨ ਅਤੇ ਸੇਵਾਵਾਂ, ਜਿਵੇਂ ਕਿ ਬਰੇਲ ਵਿੱਚ ਦਸਤਾਵੇਜ਼, ਵੱਡਾ ਪ੍ਰਿੰਟ, ਅੰਡੀਓ, ਅਤੇ ਹੋਰ ਪਹੁੰਚਯੋਗ ਇਲੈਕਟ੍ਰਾਨਿਕ ਫਾਰਮੈਟ ਵੀ ਉਪਲਬਧ ਹਨ। ਇਹ ਸੇਵਾਵਾਂ ਮਹਤਵਪੂਰਨ ਹਨ।

توجه

اگر به کمک به زبان خودتان نیاز دارید، لطفاً با 883-8711 ext 14408 تماس بگیرید یا به اداره مشاور مالی مراجعه کنید. این اداره از ساعت 8 صبح تا 4:30 بعدازظهر باز است و در St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404 مثل اسناد به خط بریل، چاپ بزرگ، قالب صوتی و سایر قالب‌های الکترونیکی با دسترسی آسان نیز موجود است. این خدمات را ایگان است.

โปรดทราบ:

หากคุณต้องการความช่วยเหลือเป็นภาษาของคุณ โปรดติดต่อหมายเลข (909) 883-8711 ext 14408 หรือเข้าไปที่สำนักงานที่ปรึกษาทางการเงิน สำนักงานเปิดทำการเวลา 8:00-16:30 น. และตั้งอยู่ที่ที่อยู่ St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404 มีความช่วยเหลือและบริการให้สำหรับผู้พิการ เช่น เอกสารอักษรเบรลล์ เอกสารตัวอักษรขนาดใหญ่ เสียง และรูปแบบอิเล็กทรอนิกส์เพื่อช่วยการเข้าถึงอื่น ๆ ให้ใช้งานได้ด้วยเช่นกัน บริการเหล่านี้สามารถใช้ได้ฟรี

ជនចំពោះ

ប្រសិនបើអ្នកត្រូវការជំនួយជាកាសារបស់អ្នក សូមទូរសព្ទទៅ (909) 883-8711 ext 14408 ឬចូលទៅកាន់ការិយាល័យខ្លួនបានត្រូវការិយាល័យបែកដំណើរការពីម៉ោង 8 ព្រឹក ដល់ម៉ោង 4:30 រោល និងមានទីតាំងនៅ St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404។ ជំនួយ និងសេវាសម្រាប់ជនពិការ ផ្តល់ជាផកសារជាមក្សរស្អាបការងារពីការអភិវឌ្ឍន៍អ្នកស្របតាមការងាររបស់អ្នក និងទម្រង់អនុវត្តន៍យុទ្ធសាស្ត្រនិងការងាររបស់អ្នក។