



Frequently Asked Questions

Q: How do I know if my Advocate hospital is contracted with my health plan?

A: To receive full insurance benefits, some health plans require patients to receive services at an “in-network” or “participating provider” hospital. Please call your health plan to verify its requirements and to be sure your Advocate hospital is in the network.

Q: What if my Advocate hospital is “out of network,” can I still go there?

A: In an emergency you should go the nearest hospital. Your health plan will generally cover emergency department costs or transfer you to an “in network” hospital, if it is safe to do so. If you elect to go to an “out of network” hospital in a non-emergency, you may be required to pay a larger deductible or a greater portion of your bill. Be sure you understand the “out of network” options of your health plan.

Q: How can I be sure my health plan will pay my hospital bill?

A: Some health plans require a patient to pre-certify certain services, or to notify them within a certain period of time after becoming hospitalized. If your hospitalization is not an emergency, we encourage you to review and understand the coverage provided by your health plan. (On elective procedures you should talk to your doctor and your health plan about coverage.) Please discuss any insurance eligibility or payment concerns with the Advocate staff member at the time of registration or with a financial counselor as soon as possible.

Q: How will I know how much I owe?

A: Advocate will verify your medical coverage with your health plan and will provide information regarding your coverage and an estimate of the amount you may owe for your hospital services. This amount may include a deductible, co-insurance, co-payment or charges for non-covered hospital services. You may be asked for payment of this amount during registration or discharge from the hospital.

After your health plan has processed your hospital bill, it will send you an “Explanation of Benefits” notice that provides the amount that has been paid, any non-covered or denied amounts and the remaining balance that you owe. Please review this carefully and call your health plan or the hospital immediately if you have questions or concerns. The hospital also will send you a bill for any remaining amount due (deductible, co-insurance, co-payment, or non-covered charges).

Q: What if I don’t have health insurance?

A: Advocate will not withhold or delay emergency services because of a patient’s ability to pay. If you do not have health insurance and receive hospital services including emergency services, please call a hospital financial counselor. The counselor will review payment and funding options that may be available to you. These could include an uninsured patient discount, applying for Illinois Medicaid, AllKids, FamilyCare or Crime Victims Funds, interest free payment plans and Advocate’s charity care. For more information about financial assistance, call **847.990.6358**.



 **Advocate
Condell Medical Center**

801 S. Milwaukee Ave. || Libertyville, IL 60048
847.362.2900
www.advocatehealth.com/billpay

Understanding Billing
and Financial Assistance



Financial Advocacy for Our Patients

 **Advocate
Condell Medical Center**

Inspiring medicine. Changing lives.



Thank you for choosing Advocate Health Care. Our mission is to serve the health needs of individuals, families and communities by delivering quality and compassionate care to all. Health insurance and hospital bills can be confusing. This guide should help you understand your bill and also explain how you may receive financial assistance if you are unable to pay. It is part of our commitment to provide financial advocacy for our patients. We hope this information will answer many questions about your health insurance and hospital billing. Our financial services staff is experienced and available to assist you in any way.

Advocate provides these services

Advocate will verify your medical coverage with your health plan and may provide information regarding your coverage and an estimate of the amount you may owe for your hospital services. This amount may include a deductible, co-insurance, co-payment or charges for non-covered hospital services.

We will bill your health plan for you, including Medicare and Medicaid, for payment of hospital services. If you have more than one health plan, Advocate will bill all carriers.

You will receive regular, easy-to-read hospital statements showing the most current balance owed by your health plan or due from you. Advocate will send you a hospital statement after your health plan has paid, which will notify you of any remaining balance owed. You may get an itemized bill by calling or requesting online.

You have 24-hour access to your account information through our online billing website available at www.advocatehealth.com/billpay or through an automated telephone system at **630.645.2400**.

You will have access to a financial counselor who can answer billing questions or help with payment issues. Counselors can assist you or family members with questions concerning insurance benefits, hospital charges, payment options and applying for financial assistance programs. Please let us know if you are unable to pay for your hospital services. We will work with you to determine if you qualify for Advocate's own financial assistance program. The financial assistance program can help patients earning up to 600 percent of the federal poverty level receive a discount of 50-100 percent of the hospital bill.

What you can do to help us

Advocate asks that you provide your complete health plan information when you register. This includes presenting a driver's license or other form of identification, all insurance cards and authorization forms. We will ask you to sign a release of information and assign insurance benefits to the hospital.

Please understand and comply with the requirements of your health plan by knowing your benefits, obtaining proper authorization for services,

submitting referral or claim forms, or completing a coordination of benefits form as your health plan may require. If you are scheduled for outpatient services, please bring your physician's order and diagnosis with you, or be sure your physician has provided it to the hospital before your arrival.

Please respond promptly to requests you receive from your health plan. While we will attempt to provide all information and paperwork to your health plan, sometimes they require a response from you to resolve issues related to your account or insurance coverage. If your health plan has not made payment within a reasonable period of time (usually 60 days after billing) and has not responded to our attempts to resolve payment matters for you, the balance owed may become your responsibility.

Please make timely payment on your portion of the hospital bill. Payment for your hospital bill is ultimately your responsibility, with the exception of approved Medicare, Medicaid, TriCare and HMO services. You may be asked to pay at the time of service or at discharge if you have a deductible, co-insurance, co-payment or you do not have insurance coverage for your hospital services. Advocate Health Care accepts: cash, personal check, debit card, money order, Visa, MasterCard, Discover and American Express. Interest free payment plans also are available and may be arranged through a financial counselor by calling **847.990.6358**.

Please call us if you have any questions or concerns about a hospital bill as soon as possible. The best number to call is always the one on the bill you are inquiring about. If your hospital bill shows tests or procedures ordered by your physician that your health plan does not cover, it is important to check your health plan handbook or call the telephone number on your insurance card for more information.

Please let us know if you may have problems paying your portion of your hospital bill as soon as possible. As a faith-based organization, Advocate is committed to assist those in need in a dignified and respectful way. If you are having financial difficulties, please let us know. A financial counselor will talk with you about payment options that may be available including payment plans, government programs or charity care. To reach a financial counselor to learn more about assistance, call **847.990.6358**.

Please help us determine whether you qualify for government or third-party funding for your hospital bill. If you need financial assistance to pay all or a portion of your bill, we may ask you to help the financial counselor complete applications for programs such as Illinois Medicaid, All Kids or Family Care. If your hospitalization results from an accident for which another party is responsible, you may be asked to provide additional information. Please cooperate with us and provide any information or other assistance requested to allow these resources to be used to pay your bill.

Your Doctor Bill

Advocate's hospital bills do not include fees for any physician, surgeon or other health care professional's services. If your treatment includes the services of a radiologist, pathologist, anesthesiologist or other physician specialist, **you will receive a separate bill from these physicians.**

As doctors are not employees of the hospital, they may not be participating providers in the same insurance plans and networks as the hospital. As a result, you may have a greater financial responsibility for services provided by physicians and health care professionals who are not under contract with your health plan. Questions about coverage or benefit levels should be directed to your doctor or health care plan.

Physician and other professional services provided at the hospital are not covered by Advocate's charity care program or other financial assistance. You must check with your doctor directly about financial assistance and payment plans that may be available to you for these services.

If you have questions regarding any of your physician bills, please call the telephone number printed on the physician's bill.

For Medicare Patients

If you are Medicare-eligible and scheduled for outpatient services, please bring your physician's order and diagnosis with you, or be sure that your physician has provided it to the hospital before you arrive. If Medicare does not cover the services ordered, you may be asked to sign a Medicare Advance Beneficiary Notice to confirm that you have been informed of your payment responsibility.