

Hospital-based care and you



As of January 1, 2011, we've made the transition to hospital-based designation. This transition is a positive for our patients, and will enable us to continue to provide excellent care to you and your family for many years to come.

Through our partnership with the Elmhurst Memorial Healthcare system, you can count on us to maintain the quality of care and level of physician expertise you've come to expect, while offering more integrated services and state-of-the-art facilities — all while being held to the top industry standards.

Frequently Asked Questions

1 WILL THIS BENEFIT ME AS A PATIENT?

Yes. Hospital-based care offers the following advantages:

- Maintains performance standards through Joint Commission accreditation
- Attracts high-quality physicians and makes them available to you
- Ensures continued high standards for safety and quality of care
- Provides integrated health system/electronic medical records (especially helpful in emergencies)
- Ensures consistency in the delivery of care
- Supports state-of-the-art facilities

2 WHY AM I RECEIVING TWO BILLS?

One bill is for the professional (or clinical) fees from your visit, and the other bill is for the facility fee. The reduced professional/clinical fee covers only the time and medical advice provided during your visit. Should you have any questions regarding your professional/physician fee bill, please contact Elmhurst Memorial Hematology Oncology Associates at **(630) 993-5657**.

Facility fees will be billed by Elmhurst Memorial Hospital. The facility fee is the charge for administrative and other costs that are required to support the facility of your physician group, including office space, nursing stations, clerical support, supplies and more. If you have any questions regarding your facility fee bill, please contact the Hospital Billing Department at **(630) 993-5700**.

3 WILL I STILL PAY JUST MY CO-PAY?

Many insurance providers will continue to process claims as they did before the change to hospital-based care, and will leave your co-pay as your responsibility. It is important to speak to your employer or insurance company to determine how your particular plan will process claims, and if you will incur any additional cost as a result of the split bill.

4 I'VE NEVER PAID ANYTHING FOR ANNUAL WELLNESS EXAMS OR IMMUNIZATIONS. WILL THIS CHANGE?

Preventive care is encouraged by many insurance providers. Therefore, most companies will continue to process claims as they did before the change to hospital-based care. Once again, because each plan has its own rules, you should speak to your employer or insurance company to determine how your particular plan will view these services.

We appreciate the trust you place in us during this transition, and look forward to better serving you as part of the Elmhurst Memorial Healthcare network.

Medical Billing Practice and Notice of Co-Insurance

A hospital-based facility is very similar to a physician's office, but requires that we separate your bill into two portions: (1) a reduced physician bill for the services and procedures performed by your personal physician and (2) a hospital bill for all other costs of your visit, including nursing staff, office space, clerical support, supplies and more.

As mentioned above, we have reduced our fees for the services provided by your physician as a result of this change. Your insurance company can continue to approve these two bills as it did when they were billed as a physician office, or may process them as an outpatient hospital claim. If processed as an outpatient claim, and at the discretion of your insurance, it could result in a slightly higher out-of-pocket cost to you.

Both of the bills that you receive are subject to the terms, conditions and exclusions of your individual insurance policy. Please note that these bills may be subject to separate co-pays, deductibles and/or coinsurance, as defined by your insurance policy.

For detailed information regarding specific coverage under your plan and how hospital-based billing may impact you, please contact the benefits administrator at your employer, your insurance company or Medicare at 1 (800) 633-4227.

