

PATIENT INFORMATION SHEET

Financial Assistance Program

Holy Cross Health's patient financial assistance policy applies in those cases where patients do not have enough income or assets to pay for their care and do not qualify for programs that provide medical coverage such as Medicare, Medicaid, commercial insurances, workers' compensation, and other state and local programs. Co-pay, deductible and coinsurance amounts for insured patients may also be eligible for financial assistance. For qualifying patients, our program covers a percentage of all medically necessary services charged and billed by the hospital and our hospital-based physicians; US Acute Care Services (Hospitalists and Emergency Physicians), George Washington University Medical Faculty Associates, Community Neonatal Associates, Pathology Associates of Silver Spring, Diagnostic Medical Imaging Associates, Silver Spring Emergency Physicians, Holy Cross Anesthesiology Associates, Capital Critical Care (Intensivist).

Eligibility for our financial assistance program is determined on an individual basis, evaluating both income and assets. Patients whose income is less than 400% of the federal poverty level and whose net assets do not exceed \$10,000 as an individual or \$25,000 as a family may qualify. Patients with family income up to 500% of the federal poverty level that demonstrate a financial hardship as a result of medical debt may also qualify. Once granted, financial assistance remains in effect for a period of 6 months and applies to all medically necessary services not covered by other programs unless the patient becomes eligible for coverage under public programs during this time. Patients found eligible for financial assistance will not be charged more than amounts generally billed.

In order to evaluate eligibility, documentation must be provided to verify income and assets. For a listing of required documents, further details on how to apply for financial assistance or to request an application via mail, please contact one of our financial counseling offices located in Main Registration at Holy Cross Hospital (301-754-7195) or Holy Cross Germantown Hospital (301-557-6195). Financial Assistance documents can also be accessed through our website at www.holycrosshealth.org on our "For Patients" page. They are also displayed in the Hospital Lobby, Patient Registration, Emergency Room and Cafeteria at both Holy Cross Hospital and Holy Cross Germantown Hospital. The Financial Assistance Policy, Application and Plain Language Summary is translated into the following languages: Spanish, French and Simplified Chinese.

Patient's Rights and Obligations

Maryland law requires that each hospital notify patients of their right to receive assistance in paying their hospital bill. Maryland law also requires that each hospital notify patients of their obligation to pay the hospital bill and provide complete and accurate information to the hospital in the timeframes specified.

Patients' have the **Right** to:

- Request and receive a written estimate of total charges for hospital non-emergency services, procedures, and supplies that are reasonably expected to be provided and billed for by the hospital.
- Apply for financial assistance and if criteria are met, receive assistance from the hospital in paying their bill.
- Contact the hospital to request an explanation of their hospital bill and an itemization of services received.
- Contact the hospital for assistance if they feel they have been wrongly referred to a collection agency.

Patients are **Obligated** to:

- Pay the hospital bill in a timely manner.
- Contact the hospital immediately if the patient cannot afford to pay the bill in full and seek assistance in resolving their outstanding balance.

- Provide accurate and complete information to the hospital regarding insurance coverage prior to or at the time of service and upon request.
- Contact the hospital promptly to provide updated/corrected information if their financial position changes.

Holy Cross Health Contact Information

If you have questions about your bill, would like to request an itemized statement or to pay or establish payment arrangements for your bill, please contact a customer service representative at 301-754-7680, Monday through Friday, between 9:00 a.m. to 4:00 p.m. For your convenience, you may also make an online payment using a major credit card by visiting our website at www.holycrosshealth.org.

Applying for the Maryland Medical Assistance Program

For assistance in determining whether you qualify for Medicaid or other available programs, please contact one of the numbers below or visit the Maryland Department of Health and Mental Hygiene at www.dhmf.state.md.us/gethealthcare for more information. On-site representatives (DECO) are also available by calling 301-754-7628.

Medicaid eligibility is based on medical condition, economic situation, citizenship, age and family size.

Silver Spring	Rockville	Germantown	Prince Georges Co.
<p>Local Office 8818 Georgia Ave., 1st Fl. Silver Spring, MD 20910</p> <p>Phone: 240-777-3100 Fax: 240-777-3070</p>	<p>Local Office 1301 Piccard Dr., 2nd Fl. Rockville, MD 20852</p> <p>Phone: 240-777-4600 Fax: 240-777-4100</p>	<p>Local Office 12900 Middlebrook Rd., 2nd Fl. Germantown, MD 20874</p> <p>Phone: 240-777-3420 Fax: 240-777-3477</p>	<p>Local Office 6505 Belcrest Rd. Hyattsville, MD 20782</p> <p>Phone: 301-209-5000</p>
<p>Service Eligibility Unit 8630 Fenton Street, 10th Fl. Silver Spring, MD 20910</p> <p>Phone: 240-777-3066 Fax: 240-777-1307</p>	<p>Service Eligibility Unit 1335 Piccard Dr., 1st Fl. Rockville, MD 20852</p> <p>Phone: 240-777-3120 Fax: 240-777-1013</p>	<p>Service Eligibility Unit 12900 Middlebrook Rd., 2nd Fl. Germantown, MD 20874</p> <p>Phone: 240-777-3591 Fax: 240-777-3563</p>	

Physician Services

Holy Cross Hospital and Holy Cross Germantown Hospital do not employ the physicians who practice at the hospital. Physician services you receive will be billed to you separately.

Outpatient Facility Fee

Holy Cross Hospital and Holy Cross Germantown Hospital are permitted to and may charge patient's a facility fee for the use of facilities, clinics, supplies, equipment, and non-physician services provided in certain outpatient areas within the hospital.

Patient Complaints

A patient or their authorized representative may file a complaint against Holy Cross Health for an alleged violation of its financial assistance policy by contacting the Maryland Health Services Cost Review Commission via email at hsrc.patient-complaints@maryland.gov.