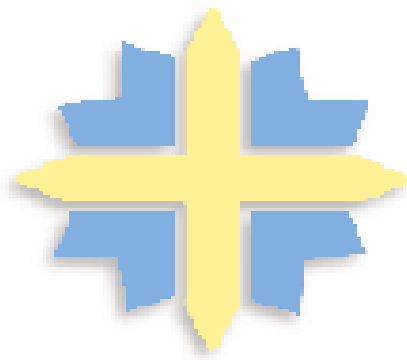




Management & Regulatory Compliance Department



CATHOLIC HEALTH SERVICES

Entity: St. Catherine's Rehabilitation Hospital

Quality, Pricing and Billing Information

Quality, Pricing and Billing Information

In compliance with [Section 395.301, Florida Statutes](#) (Price Transparency; itemized patient statement or bill; patient admission status notification), St. Catherine's Rehabilitation Hospital makes available to all patients information regarding quality, price transparency and patient billing information. Below you will find links to the Florida Health Finder, which includes information regarding quality metrics and service bundle pricing information. You will also find information regarding the health insurers and health maintenance organizations (HMO) we contract with, as well as information regarding the physicians contracted to provide services within the hospital. Finally, you will find information regarding how to request estimates or itemized bills, as well as links to our policies regarding financial assistance, charity care and collections procedures.

Please contact St. Catherine's Rehabilitation Hospital directly at (305) 357-1735 should you have any questions regarding this information.

Health Finder:

The Florida Agency for Health Care Administration makes available on its website health-related data and hospital quality metrics, including readmissions data, mortality rates, complications rates, infections rates, patient experience and other patient safety related data. **Click here to visit the floridahealthfinder.gov**

Price Transparency:

395.301 *Price transparency; itemized patient statement or bill; patient admission status notification.*

The Florida Agency for Health Care Administration provides information on payments made to facilities for defined service bundles. **To view average payments for over 200 service bundles in Florida, click here to visit the pricing.floridahealthfinder.gov**

Please note the following:

- The service bundle information is a non-personalized estimate of costs that may be incurred by the patient for anticipated services and that actual costs will be based on services actually provided to the patient
- Patients have a right to request a personalized estimate from St. Catherine's Rehabilitation Hospital. Please call our Centralized Billing Office at (954) 484 – 1515, Extension 5258 and ask to speak with the Patient Services Representative so that we can assist you.

Contract Health Plans:

St. Catherine's Rehabilitation Hospital contracts with the health plans listed below. Patients are encouraged to contact their health plan directly for information regarding anticipated cost sharing responsibilities. Additional plans may be added and/or plans may be presented under an alternate name that may be different from that is listed below. Please call our Centralized Billing Office at (954) 484 – 1515, Extension 5258 and ask to speak with the Patient Services Representative so that we can assist you with the most current and accurate information.

Please note that services may be provided in St. Catherine's Rehabilitation Hospital by the facility as well as other health care practitioners, who may or may not participate with the same health insurers or health maintenance organizations (HMOs) as St. Catherine's Rehabilitation Hospital, and who may bill you separately. You should contact the health care practitioner who will provide services to you to determine which health insurers and HMOs the practitioner participate in as a network provider or preferred provider.

You may request from St. Catherine's Rehabilitation Hospital and other health care providers a personalized estimate of reasonably anticipated charges for the treatment of your specific condition.

[List of Contract Health Plans](#)

Contract Physicians:

St. Catherine's Rehabilitation Hospital contracts with the physicians below to provide medical services within the rehab hospital. These physicians may bill separately for their services. Please note that these physicians may or may not participate with the same health insurers or health maintenance organizations (HMOs) as St. Catherine's Rehabilitation Hospital. You should contact the health care practitioner who will provide services to you to determine which health insurers and HMOs the practitioner participates in as a network provider or preferred provider.

Additional physicians may be added and/or physicians may be presented under an alternate name that may be different from what is listed below. Please call us directly at (305) 357-1735 and ask to speak with the Medical Staff Office Coordinator so that we can assist you with the most current and accurate information.

[Physician Listing](#)

You may request from St. Catherine's Rehabilitation Hospital and other health care providers a personalized estimate of reasonably anticipated charges for the treatment of your specific condition.

Requesting an Estimate:

Patients may request an estimate of anticipated charges. **Estimates will be provided within 7 business days from the receipt of the request.** Estimates will be based on the average payment received for the anticipated services to be provided; however, you may request a more personalized estimate. Patients are encouraged to contact their health plan for information regarding anticipated cost sharing responsibilities. To request an estimate, please contact the Centralized Billing Office at (954) 484 – 1515, Extension 5258 and ask to speak with the Patient Services Representative.

Please note the following:

- Actual costs may exceed the estimate.
- Physician services may be billed separately. These physicians may or may not participate with the same health insurers or health maintenance organizations (HMOs) as St. Catherine's Rehabilitation Hospital. You should contact the health care practitioner who will provide services to you to determine which health insurers and HMOs the practitioner participates in as a network provider or preferred provider, as well as request a personalized estimate of reasonably anticipated charges for the treatment of your specific condition. See the Physician Listing for contact information.
- You may pay less for services at another facility or in another health care setting.
- Our policies regarding financial assistance, charity care and collection procedures are available at this link: [Financial Assistance Policy](#) / [Charity Care](#) / [Collection Procedures](#)

Requesting an Itemized Statement or Bill:

Patients may request an **itemized statement or bill**. The itemized statement or bill will be provided within **7 business days after the request or the discharge date**, whichever is later. The itemized bill will contain a description of the individual charges by date. Physician services may be billed separately; you should contact the physicians providing services to obtain an itemized statement or bill for services provided. To request an itemized statement or bill, please call the Centralized Billing Office at (954) 484 – 1515, Extension 5258 and ask to speak with the Patient Services Representative.

Billing questions or disputes can be addressed by calling the Centralized Billing Office at (954) 484 – 1515, Extension 5258 and ask to speak with the Patient Services Representative.

When requested, we will make available to a patient all records necessary for **verification of the accuracy** of the patient's statement or bill **within 10 business days after the request for such records**. These records will be available to the patient before and after payment of the statement or bill.

If you are not fully satisfied with the resolution to your questions or disputes, you may contact the Florida Agency for Health Care Administration directly at 888.419.3456 / 800.955.8771.

Quality, Pricing and Billing Information

PRICE TRANSPARENCY / BILLING

- [**PRICING LIST / CHARGE MASTER**](#)
- [**CONTRACTED SERVICES AND ALLIED HEALTHCARE PROVIDERS / PHYSICIAN LISTING**](#)
- [**GRIEVANCE-COMPLAINT FILING DISCLOSURE**](#)
- [**BILLING DISPUTES PROTOCOL**](#)
- [**MANAGED CARE INSURERS AND WEB ADDRESSES**](#)

Financial Assistance Eligibility

CHARITY CARE AND DISCOUNTED ELIGIBILITY

Federal Poverty Income Guideline Sliding Scale Assistance Policy.

Simple Application Process

1. [**Financial Assistance Policy Review**](#)
2. [**Print the Verification Letter**](#)
3. Complete the Application for Financial Assistance form in [**English**](#) and [**Spanish**](#)
4. Fax, mail or deliver to your facility's Business Office along with all supporting documentation requested
5. Facility to complete [**Charity Admission Income Worksheet**](#) and submit to Corporate Business Office (CBO)

- [**BILLING AND COLLECTIONS POLICY**](#)

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- [**BILLING DISPUTES PROTOCOL**](#)
- [**MANAGED CARE INSURERS AND WEB ADDRESSES**](#)

Financial Assistance Eligibility

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