



SUMMARY FINANCIAL ASSISTANCE & PATIENT BILLING PRACTICES

Insurance and Billing Information

Brooks Rehabilitation strives to make it easy for you to understand your insurance benefits and out of pocket financial responsibility upon admission to any of our facilities or services. Our registration/admission teams will contact your insurance company to obtain your coverage information for the services you will be receiving at Brooks Rehabilitation and will explain to you what is and is not covered and what your financial responsibility will be.

Florida Health Finder

The <u>FloridaHealthFinder.gov</u> website was created to give patients access to data that will allow them to find accessible, affordable and quality healthcare. The website provides detailed healthcare information and data that will help consumers make informed health care decisions.

Pricing Transparency

The <u>Florida Health Pricing</u> website was created by the Florida Agency for Healthcare Administration (AHCA) to provide access to data on the average payments made to facilities for over 200 defined service bundles. This information is a non-personalized estimate of costs that could be incurred by a patient for anticipated services based on a care bundle. Any bill from Brooks Rehabilitation would be based on the actual services provided to the patient. Patients have the right to request a personalized estimate of cost from healthcare facilities. Please contact one of our Business Offices to obtain a cost estimate:

- Inpatient Rehabilitation Hospital & Medical Group (904) 345-7600
- Outpatient Services (800) 418-0263
- Bartram Skilled Nursing, Assisted Living & GreenHouse (904) 528-3017
- University Crossing Skilled Nursing (904) 345 8326
- Home Health & Personal Care and Companion Services (904) 722-1515

Here is a listing of our standard charges for the Inpatient Rehabilitation Hospital and Outpatient Services: <u>Brooks Rehabilitation Charge</u>
<u>Master Sheet</u>

Here is the listing of our standard charges for each diagnosis related group (DRG) for the Inpatient Rehabilitation Hospital: <u>Brooks</u> Rehabilitation Diagnosis Related Groups – Q3 2019

Charges & Price Estimates

Our Business Offices can provide you with standard charges for services within each of our facilities. Your final bill from Brooks Rehabilitation will vary depending on the actual services provided, existing health conditions that may impact your care and your insurance coverage if you are insured. Also, our charges do not include physician fees. Physicians will bill you separately for their services. Physicians may or may not participate with your Insurance Plan and may or may not participate in the same health plans as Brooks Rehabilitation. We are only contracted with the Physical Medicine Specialists, Inc. (Brooks Rehabilitation Medical Group). This medical group does participate in the same health plans as Brooks Rehabilitation Hospital.



Financial Assistance Policy

In accordance with our mission to empower people to achieve their highest level of recovery through excellence in rehabilitation, Brooks Rehabilitation has established guidelines for providing financial assistance to those who have limited financial resources. If you do not have health insurance, we offer financial assistance for medically necessary care as a discount from our normal charges if your household income does not exceed four times the Federal Poverty Guidelines and you are a US Citizen. All applicants will be screened for Medicaid coverage and must cooperate with the Medicaid representatives to be considered for financial assistance. If you are eligible for financial assistance under our Policy, you will receive free or discounted assistance according to the following income criteria:

- If your annual household income is up to 200% of the Federal Poverty Guidelines, you may qualify for free care.
- If your annual household income is between 201% and 400% of the Federal Poverty Guidelines, you may receive care discounted to the amount we generally bill insured patients for such services.

Even if you have insurance, as long as you meet our income criteria for the care setting, you may be eligible for financial assistance if: your insurance does not provide coverage for the medically necessary services you are seeking or you have exhausted your lifetime maximum insurance benefits. Financial Assistance cannot be used to cover deductibles for your insurance plan.

Additional Ways to Qualify

If you do not meet the income criteria above, you may be considered on a case-by-case basis for financial assistance under the following circumstances:

- Catastrophic Balance: If you will have a balance due to Brooks Rehabilitation of greater than 25% of your annual household income, you may be considered for financial assistance.
- Special Medical Circumstances: If you are seeking treatment that can only be provided by Brooks Rehabilitation or you would benefit
 from continued medical services from BROOKS for continuity of care, you may be considered on a case-by-case basis for financial
 assistance for that specific treatment.

Charges Will Not Exceed Amounts Generally Billed

If you receive financial assistance under our Policy, you will not be charged more for medically necessary care than the amount we generally bill patients having commercial insurance or Medicare coverage.

How to Obtain Copies of Our Policy and Application

You may obtain a free copy of our Policy and the Financial Assistance application form:

- (1) On the Brooks Rehabilitation website at www.brooksrehab.org
- (2) In our admission/registration areas or from any of our Business offices
- (3) By mailing a request to 3901 University Blvd South, Jacksonville, FL 32216 Attn: Business Office.



How to Apply and Obtain Assistance

Inpatient Services: Application for Financial Assistance must be completed and approved prior to admission. Your Nurse Liaison will advise you.

All others: You may apply at any point in the scheduling or billing process by completing and submitting an application and providing income information.

Any Financial Assistance Application whether completed in person, online, delivered or mailed in, will be forwarded to the Business Services team for evaluation and processing.

If you need any help in applying, please contact our Business Office:

- Inpatient Rehabilitation Hospital & Medical Group (904) 345-7630
- Outpatient Services (800) 418-0263
- Bartram Crossing Skilled Nursing, Assisted Living & GreenHouse (904) 528-3017
- Home Health & Personal Care and Companion Services (904) 722-1515
- University Crossing Skilled Nursing (904) 345-8326

Patient Billing and Collections

Your benefit coverage is a contract between you and your insurance company, and while we will cooperate to the fullest in expediting your claim, you are ultimately responsible for your account. Brooks Rehabilitation strives to work with every patient that does not qualify for financial assistance, to resolve unpaid balances. We ask that you pay your balance within 30 days of billing. Patient balances after insurance has processed that exceed 120 days without payment or an acceptable payment plan arrangement will be subject to collections by our contracted Collection Agency. Prior to referring an account to the Collection Agency the Business Office will:

- 1. Mail at least 3 statements to the patient/responsible party to the address on file.
- 2. Attempt to contact the patient/responsible party by phone.
- 3. Send a pre-collection letter to the patient/responsible party to the address on file.

If the patient/responsible party communicates at any time that they refuse to pay the balance, then that will prompt the account to be referred to the Collection Agency.

Please note that this excludes the preadmission advance payment requirement for private pay patients. For any patients requesting to privately pay for services, payment is due prior to services being rendered. For the overnight care settings specified pre-payment amounts are required prior to admission. For additional information related to privately paying for services please contact the business office.



Patient Resources

The following information is available within 7 business days upon request:

- Itemized Patient Statement
- Financial Assistance Policy and Application
- Cost Estimates for Non-Emergency Care

The following information is available within 10 business days upon request:

Medical Records