



### 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 [FloridaHealthFinder.gov](https://www.floridahealthfinder.gov) 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 [Florida Health Pricing](https://www.floridahealthpricing.com) 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
- Skilled Nursing, Assisted Living & GreenHouse 904-528-3017
- Home Health & Personal Care and Companion Services 904-722-1515

Here is our machine readable standard charges file for the Inpatient Rehabilitation Hospital and the Outpatient Hospital Based Services: [Brooks Rehabilitation Charge Master Sheet](#)

Here is a listing of the shoppable services (services that can be scheduled in advance) provided by Brooks Rehabilitation Hospital, Outpatient Hospital Based Clinics, and the Brooks Medical Group: [Brooks Rehabilitation Shoppable Services List](#)

### 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. Here is the link to the Brooks Rehabilitation Medical Groups website <https://brooksrehab.org/brooks-medical-group/>



## SUMMARY FINANCIAL ASSISTANCE & PATIENT BILLING PRACTICES

### **Financial Assistance Policy**

If you do not have health insurance, we provide 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 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, 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.

### **Charitable Care Policy**

If you do not have health insurance, we provide charity care for medically necessary care. Charity care means providing uninsured patients who do not have the means to pay with free services. All applicants will be screened for Medicaid coverage and must cooperate with the Medicaid representatives to be considered for Charity Care. If you are eligible for Charity care under our Policy, you will receive free 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 services.

#### 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 <https://brooksrehab.org/contact-us/>
- (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.



## SUMMARY FINANCIAL ASSISTANCE & PATIENT BILLING PRACTICES

### 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**

Brooks Rehabilitation strives to work with every patient that does not qualify for financial assistance, to resolve unpaid balances. Patient balances after insurance has processed that exceed 120 days without payment or a 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 prompt pay requirement for private pay patients. For any patients needing to privately pay for services, payment is due prior to services being rendered. For the overnight care settings a pre-payment deposit is required. 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