

Information Required for Processing Claims

To insure your medical benefit plan can process your claim promptly, accurately and with maximum benefit to you, **provide us with the following:**

Patient and health plan member identification to include:

- ◆ Patient *and* member full name.
- ◆ Patient & member social security number.
- ◆ Patient relationship to member & birth date.
- ◆ Copy of member's plan identification card, or full name and identification number of member's health plan, including division or group, if applicable.
- ◆ If the patient is a spouse or dependent, provide details of any other insurance coverage on the patient, including plan name and number, covered member name, plan address and phone number.
- ◆ If the condition being treated (either accident or illness) took place at, or was a result of work or employment, indicate need for filing with Worker's Compensation.
- ◆ If the condition being treated may have been caused by another party, provide name and address of other party and name and address of their insurance company or attorney.

General Information

EKG, EEG, Radiology & Pathology Tests:

If you receive EKG, EEG, Radiology or Pathology Services, you may receive a separate billing from the physician(s) providing the test interpretation.

Anesthesia Service:

You may receive a separate bill for Anesthesia Service.

Physicians: You may receive a separate bill from your doctor for services you received while in the hospital.

PMHC Mission

Phelps Memorial Health Center is a progressive family centered health care provider delivering a continuum of care that enhances the quality of life for the people we serve.



**PHELPS MEMORIAL
HEALTH CENTER**

1215 Tibbals St.
Holdrege, NE 68949
308-995-2211
www.phelpsmemorial.com

**PHELPS MEMORIAL
HEALTH CENTER**

**Helping You
Understand
Billing, Payment &
Insurance**



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IMPORTANT: Pre-Certification

Many insurance companies require you to call them before certain tests or procedures and before you are admitted to the hospital. Emergency admissions usually allow a 24-hour grace period. Most plan cards list the toll-free phone number to call on the card.

Failure to pre-certify may result in reduction in your benefits.

Payment:

Individual/Group Insurance: Phelps Memorial Health Center will submit your hospital claims to your insurance company (s). Our agreement is with you, our patient, not your insurance company. Our office is not involved in the settlement of disputes. You are responsible for the payment of your account. Hospital policy prefers that your account be paid in full within 30 days from your discharge or after insurance has paid their portion. We accept Cash, Checks, Discover, Visa, MasterCard, American Express and EFT payments. Extended monthly payment plans can be arranged with our Financial Counselor.

Liability or Workers' Compensation:

Hospital claims will be submitted for services incurred resulting from injury, accident, or worker's compensation. Unpaid balances are the responsibility of the patient regardless of pending, disputed, or litigated claims.

Medicare: Hospital claims will be submitted to Medicare. If you have supplemental insurance, we will also submit that claim. You will be sent a bill for any balance due.

Medicaid: Hospital claims will be submitted to Medicaid. You will be sent a bill for your share of cost, co-pays, or non-covered services.

**Medicaid requires you provide us with a current copy of your Medicaid eligibility card.*

No Insurance Coverage: Hospital policy prefers your account to be paid in full within one year of the date of service. We accept Cash, Checks, Discover, Visa, MasterCard, American Express and EFT payments. Extended monthly payment plans can be arranged with our Financial Counselor.

Financial Assistance: You may be eligible for assistance through Nebraska Health and Human Services. For more information, contact your local office.

Phelps Memorial Health Center is committed to providing hospital service to those who are in need of financial assistance. Financial information will be requested of anyone applying to determine eligibility. For more information or to request an application please contact our Financial Counselor at 308-995-2876.

For questions regarding your account:

Main Switchboard

(308) 995-2211

Financial Counselor

Available Monday—Friday, 8:30 am—5:00 pm

(308) 995-2876

Patient Accounts

Available Monday—Friday, 8:00 am—5:00 pm

(Last names beginning with letters)

A-E (308) 995-2866

F-K (308) 995-2870

L-R (308) 995-2875

S-Z (308) 995-2874

