

**Grancell Village of the LA Jewish Home for the Aging
Joyce Eisenberg Keefer Medical Center - Auerbach Geriatric Psychiatric Unit (AGPU)**

**Important Billing Information for Patients
Financial Assistance / Plain Language Summary**

This handout is designed to help our patients understand the Financial Assistance that is available to eligible patients, the application process for Financial Assistance, and your payment options. Your hospital bill will not include any bill for services you may receive during your hospital stay from physicians or any other providers that may bill you separately for their services. If you wish to seek assistance with paying your bills from these other providers, you will need to contact the providers directly.

Payment Options: AGPU has many options to assist you with payment of your hospital bill.

Medi-Cal & Government Program Eligibility: You may be eligible for a government-sponsored health benefit program. Please contact the AGPU Program Director (818) 758-5045 if you would like additional information about government programs, or need assistance with applying for such programs.

Covered California: You may be eligible for health care coverage under Covered California, which is California's health benefit exchange under the Affordable Care Act. Contact the AGPU Program Director (818) 758-5045 for more detail and assistance to see if you qualify for health care coverage through Covered California.

Payment Plans: Patient account balances are due upon receipt. Patients may be eligible to make payment arrangements for their hospital bill. The payment plan is negotiated between the Hospital and the patient., and a Financial Agreement must be signed before AGPU can accept payment arrangements that allow patients to pay their hospital bills over time.

Summary of Financial Assistance (Charity Care): The AGPU is committed to providing financial assistance to Patients who have no third-party source of payment, such as an insurance company or government program, for any portion of their medical expenses **and** have a family income at or below 350% of the federal poverty level. The following is a summary of the application process for patient who wish to seek Financial Assistance.

You may apply for Financial Assistance using the application form that is available from the AGPU Program Director by calling 818-758-5045 or the Director of Social Services at 818-758-5038, or on the AGPU or Hospital website (www.lajh.org). During the application process you will be asked to provide information regarding the number of people in your family, your monthly income, and other information that will assist the hospital with determining your eligibility for Financial Assistance. You may be asked to provide a pay stub or tax records to assist AGPU with verifying your income.

After you submit the application, the hospital will review the information and notify you in writing regarding your eligibility. If you have any questions during the application process, you may contact the AGPU Program Director at (818) 758-5045.

If you disagree with the hospital's decision, you may submit a dispute to the AGPU Program Director

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Copies of this Financial Assistance Policy, the Plain Language Summary and Application, as well as government program applications are available in English and Spanish in person at the AGPU Program Director's office as well as at www.lajh.org and available by mail. We can also send you a copy of the Financial Assistance Policy free of charge if you contact our AGPU Program Director at 818-758-5045 or the Director of Social Services at 818-758-5038

In accordance with Internal Revenue Code Section 1.501(r)-5, AGPU adopts the prospective Medicare method for amounts generally billed; however, patients who are eligible for Financial Assistance are not financially responsible for more than the amounts generally billed.

Pending applications: If an application has been submitted for another health coverage program at the same time that you submit an application for Financial Assistance, neither application shall preclude eligibility for the other program.

Notice of Availability of Financial Estimates: You may request a written estimate of your financial responsibility for Hospital Services. Requests for estimates must be made during business hours. The estimate will provide you with an estimate of the amount the hospital will require the patient to pay for health care services, procedures, and supplies that are reasonably expected to be provided by the hospital. Estimates are based on the average length of stay and services provided for the patient's diagnosis. They are not promises to provide services at fixed costs. A patient's financial responsibility may be more or less than the estimate based on the services the patient actually receives.

The hospital can provide estimates of the amount of Hospital Services only. There may be additional charges for services that will be provided by physicians during a patient's stay in the hospital, such as bills from personal physicians, and any other medical professionals who are not employees of the hospital. Patients will receive a separate bill for these services.

If you have any questions about written estimates, please contact the AGPU Program Director 818-758-5045 or the Director of Social Services at 818-758-5038.