UNIVERSITY OF ILLINOIS HOSPITAL
MANAGEMENT POLICY AND PROCEDURE

NO.: LD 3.10
APPROVAL DATE: September 26, 2014
EFFECTIVE DATE: October 1, 2014

SUBJECT: Public Viewing of Hospital Charges

OBJECTIVE

This policy allows the public to view the University of Illinois Hospital’s standard charges in compliance with the Affordable Care Act, Section 2718(e) of the Public Health Service Act. It is intended to promote transparency for patients to understand their potential financial liability for services obtained at our hospital and to allow comparison for similar services across hospitals.

DEFINITIONS

Hospital charges: The amounts set before any discounts. Hospitals are required by the federal government to utilize uniform charges as the starting point for all bills. Those uniform charges are maintained in the hospital charge master. Charges are based on what type of care was provided and can differ from patient to patient for the same service depending on any complications or different treatment provided due to the patient’s health. Therefore, actual charges for a specific patient may differ from the listed standard charges as the level of service intensity changes.

Uninsured Patient: A patient who does not have third-party coverage from a health insurer, a health care service plan, Medicare or Medicaid, and whose injury is not compensable for purposes of workers’ compensation, automobile insurance or other insurance as determined and documented by UI Health (210 ILCS 88/10 – Fair Patient Billing Act, see also 210 ILCS 89/5 – Hospital Uninsured Patient Discount Act).

POLICY

It is the policy of the University of Illinois Hospital (“Hospital” or “UI Health”) to provide pricing estimates to patients upon request, including access to the hospital charge master. Uninsured Patients will be offered standard discounts as reflected in the hospital financial assistance policy, LD 3.07-Hospital Financial Assistance for Uninsured Patients. Patients seeking estimates on coinsurance or other out of pocket costs may need to contact their third party insurance carrier in order to calculate certain amounts not paid by the insurance company.

PROCEDURE

1. Estimates/Financial Assistance: Many patients that will seek hospital charge information are interested in knowing what their out-of-pocket financial responsibility will be. This is an opportunity to have important conversations regarding finances. Those with health insurance can be directed to contact their health plan for specific financial obligations. Those without health insurance can contact 866-600-CARE, to be provided with information related to UI Health’s financial assistance program, UI Health’s
Uninsured Patient Discount Program and available assistance from a UI Health Certified Application Counselor in obtaining medical coverage under the Affordable Care Act. Requests for specific price estimates should be directed to Hospital Patient Accounting at 312-996-1000 for further assistance. In order to provide immediate turn around relative to specific recurring requests servicing departments may be delegated by the Senior Director, Revenue Cycle to provide pricing estimates directly to patients without contacting Patient Accounting. In those situations, prices must be verified by the servicing departments with Patient Accounting at least annually and in concert with dates relative to hospital price increases.

2. **Time/Location to View Charges:** The public may view this information upon request by contacting Hospital Patient Accounts at 312-996-1000 or by emailing billinfo@uic.edu. Hospital Patient Accounts will provide the requested information by telephone or will schedule an appointment convenient to both Hospital Patient Accounts and the requesting party to review the information in person.

3. **Information Provided (see Addendum 1):** Additional information should be provided to patients or the general public requesting access to the Hospital’s standard charges to facilitate an understanding of hospital pricing and how that pricing relates to what patients ultimately owe. Frequently asked questions on hospital pricing and out of pocket costs will be posted to the hospital’s publically available website.

Avijit Ghosh, PhD
Chief Executive Officer

**References**

Hospital Management Policy and Procedure

*LD 3.07 – Hospital Financial Assistance for Uninsured Patients*

**Addenda**

*Addendum 1 – Patient Information on Hospital Pricing-
“University of Illinois Hospital & Health Sciences System Understanding Standard Hospital Charges and What this Means to You”, and “Frequently Asked Questions”*

**Rescission Date:**

None

**Policy Owner – Marc DeVar, Senior Director, Revenue Cycle**
Addendum 1

University of Illinois Hospital & Health Sciences System
Understanding Standard Hospital Charges and What this Means to You

Standard charges represent our pricing for specific requested services which may include bundled information on diagnosis-related groups or procedures. The charge is for care without complications. Actual charges may be different for specific patients due to medical condition, length of time spent in surgery or recovery, necessary specific equipment, supplies or medication, complications requiring unanticipated procedures or other treatment ordered by the physician.

If you are covered by health insurance, significant discounts have already been obtained by your insurance company and you only need to pay the deductible, copay and/or coinsurance as defined by your specific benefit plan. These amounts are deducted from what the hospital is paid by the insurance company and are your financial obligation. You should contact your health plan directly in order to determine what amounts may not be reimbursed by insurance.

If you do not have health insurance, significant discounts are available that could result in either the care being free or at a greatly reduced price.

Contacting a Certified Application Counselor at 866-600-CARE can help determine what financial assistance programs may be applicable in your case. Contacting Hospital Patient Accounts at 312-996-1000 or billinfo@uic.edu can help determine which discounts may be applied. This information can be used as a reasonable estimate to help guide you in what you may ultimately be asked to pay for hospital care.

Charge information provided by the hospital may not include certain professional services provided by physicians, advanced practice nurses or other independent practitioners. You will likely receive separate bills for physicians and other professionals who provided treatment and care to you. These physicians may not be participating providers in the same insurance plans and networks as the hospital. As such, there may be greater financial responsibility for you when providers or services are not under contract with the health plan.

There are a variety of online resources that may be helpful to you as you consider healthcare options.

- An important component for choosing a health care provider is determining quality of care. Information pertaining to the hospital’s quality metrics can be obtained at Hospital Report Card Act Public Notice of Quality Initiatives.
- Your doctor can be a helpful resource in choosing where to obtain care. Further Medicare hospital-specific quality outcome measures are located on Hospital Compare.
- To compare hospital median charges for nearly 50 major diagnoses, quality and patient satisfaction metrics in Illinois, go to the Illinois Hospital Report Card website.
Frequently Asked Questions

1. How much will I have to pay out of my pocket?

- If you have health insurance, you will need to pay the deductible, copay and/or coinsurance set by your health plan. If you have reached your maximum out of pocket or met your deductible for the year or if you have secondary insurance coverage that provides additional coverage, you may not owe anything. Your financial obligations could differ depending on whether the hospital or physicians are “out-of-network,” meaning the health plan does not have a contract with them. Please contact your insurance company to understand what your financial obligations will be.

- If you do not have health insurance, we will discuss financial assistance options available that could include either a complete write-off or a substantial reduction of the charges in accordance with UI Health’s financial assistance programs.

2. What does my health insurance pay?

Health plans such as Medicare, Medicaid, workers’ compensation, commercial health insurance, etc., do not pay charges. Instead, they pay a set price that has been predetermined or negotiated in advance. You only pay the out-of-pocket amounts set by your health plan.

3. What do the following health insurance terms mean?

**Deductible** means the amount you need to pay for health care services before the health plan begins to pay. The deductible may not apply to all services.

**Copay** means a fixed amount (for example, $20) you will have to pay for a covered health care service, such as a physician office visit or prescription.

**Coinsurance** means the percentage you pay for a covered health service (for example, 20% of the bill). This is based on the amount your health plan determines is the allowed amount for the service. You pay coinsurance plus any deductibles you may owe.

Your specific health care plan coverage, including the deductible, copay and coinsurance, varies depending on what plan you have selected. Health plans also have differing networks of hospitals, physicians and other providers that the plan has contracted with. It is important that you contact your health plan to discuss this specific information.

4. What is the difference between charges, cost and price?

**Total Charge** is the amount set before any discounts. Hospitals are required by the federal government to utilize uniform charges as the starting point for all bills.

The charges are based on what type of care was provided and can differ from patient to
patient for similar services, depending on any complications or different treatment provided due to the patient’s health.

**Cost** for a hospital is the total expense incurred to provide health care. Hospitals have higher costs to provide care than freestanding or retail providers, even for the same type of service. This is because a hospital is open 24 hours a day, 7 days a week and needs to have everything necessary available to cover any and all emergencies. Non-hospital health care providers can choose when to be available and typically would not provide services that would result in losses.

**Total Price** is the amount actually paid to a hospital. Hospitals are paid by health plans and/or patients, but the total amount paid is significantly less than the total charge.

- Medicare, Medicaid and most private insurers pay hospitals according to a set fee schedules or discounts depending on the service provided, much less than the hospital charge.
- Under the Illinois Hospital Uninsured Patient Discount Act, Illinois hospitals provide free care to uninsured patients with incomes up to 200% of the federal poverty level (FPL) in urban areas ($47,700 for family of 4 in 2014).
- Illinois hospitals provide discounts to 135% of the hospital’s costs to patients with incomes up to 600% FPL in urban areas ($143,100 family of 4 in 2014). For the University of Illinois Hospital (applicable to 2014) this cost based discount is a 55% discount from our standard charge.

5. **How can I use this hospital charge information for comparing prices?**

Charge information by itself is not necessarily useful in order to determine how much you ultimately may need to pay or to compare the amount you may owe across hospitals. Discounts and fee schedules are used to determine how much private insurers pay and may vary from hospital to hospital. These amounts create what is referred to as an allowed amount which is then used by your insurer to determine how much you may owe.

6. **How can I get an estimate for a specific procedure?**

If you need an estimate for a specific procedure, please contact Hospital Patient Accounts at 312-996-1000 or billinfo@uic.edu.

Estimates will be an average charge for the procedure without complications. A physician must determine specific care you may require based on considerations including your specific diagnosis, general health condition and many other factors. For example, one individual may require only a one-day hospital stay for a particular procedure, while another may require a two-day stay for the exact same procedure.

Remember that you will not pay charges. Rather, if you have health insurance, you will only pay the specified deductible, copay and coinsurance amounts established by your health
plan. If you do not have health insurance, you may be eligible for significant discounts from charges.

Please contact Hospital Patient Accounts at 312-996-1000 or billinfo@uic.edu to obtain further information about pricing at UI Health and discounts that are available to you. If you are interested in enrolling in coverage programs available under the Affordable Care Act or applying for financial assistance, please contact 866-600-CARE.