



## PATIENT INFORMATION BOOKLET



**Delhi Hospital**  
Delhi Rural Health Clinic

## ADMISSION PROCEDURES

During the registration interview, you will need to give your insurance information as well as facts about yourself, such as your address and date of birth. Providing the correct insurance information will help your bills get processed quickly and accurately. Deposits are required for all scheduled out-patient surgeries and inpatient admissions.

## GENERAL PAYMENT POLICIES

The Patient Business Services Department will file your claims when you provide your insurance information. In most cases, a bill is sent to all insurance companies on record within 7 to 10 days from the date of the outpatient treatment or discharge from an inpatient stay. Upon your request, we will provide you an itemized bill in a timely manner. You will know your insurance has paid when you receive a statement from Delhi Hospital that shows a balance due by you. Your insurance carrier will also send you an explanation of benefits when they pay your bill. If you have not received notice of insurance payment from the hospital or your insurance company within 45 days of discharge or visit, please contact your insurance carrier to help expedite payment. You are responsible for payment of all balances due on your account WITHIN NINETY (90) DAYS of your discharge date or the date of outpatient service, regardless of whether or not your insurance has paid. Other payment options that are available are:

- Cash, Check or Money Order
- Visa
- Mastercard
- Discover Card
- American Express
- Interest-Fee Payment Plans
- Patient Financial Assistance Program
- Assistance with Application for Government Assistance (For example, Medicaid)



You can also contact a Patient Business Services Representative at 318-878-6377 or 318-878-6259 to discuss financing options and programs.

## IN-NETWORK HEALTH PLANS

- Aetna Better Health Medicaid
- Aetna HMO
- Healthy Blue
- AmeriHealth Caritas Louisiana Medicaid
- CIGNA Healthcare PPO
- Coventry/First Health PPO
- Galaxy Health Network PPO
- Gilsbar 360 Alliance PPO
- Heritage Summit Healthcare Network WC
- Humana Commercial
- Humana Medicare
- Louisiana Healthcare Connections Medicaid
- MultiPlan PPO
- Peoples Health Network Medicare
- PPOplus PPO
- Stratose PPO
- Three River Provider Network PPO
- TriWest VAPC3 VA
- United HealthCare UHC
- Verity Healthnet & VHN PPO
- Vantage
- Blue Cross of Louisiana
- Tricare (Standard)

*Tricare (Prime) is out of network for prior authorized services*

## RPH CONTRACTS WITH THE FOLLOWING BAYOU HEALTH CCNS PLANS:

1. Healthy Blue (formerly known as Amerigroup Louisiana, Inc.)
2. AmeriHealth Caritas of Louisiana
3. Aetna Better Health of Louisiana
4. Louisiana Healthcare Connections, Inc.
5. United Healthcare of Louisiana, Inc.

## SEPARATE BILLING FOR PROFESSIONAL SERVICES

### **Notice:**

Professional services rendered by independent healthcare professional are not part of the hospital bill. These services will be billed to the patient separately. Please understand that physicians or other healthcare professionals may be called upon to provide care or services to you or on your behalf, but you may not actually see, or be examined by, all physicians or healthcare professionals participating in your care: for example, you may not see physicians providing radiology, pathology, and EKG interpretation. In many instances, there will be a separate charge for professional services rendered by physicians separate from the bill for hospital services. These independent healthcare professionals may not participate in your health plan, and you may be responsible for payment of all or part of the fees for services provided by these physicians who have provided out-of-network services, in addition to applicable amounts due for copayments, coinsurance, deductibles, and non-covered services.

We encourage you to contact your health plan to determine whether the independent healthcare professionals are participating with your health plan. In order to obtain the most accurate and up-to-date information about in-network and out-of-network independent healthcare professionals, please contact the customer services number of your health plan or visit its website. Your health plan is the primary source of information on its provider network and benefits. To help you determine whether the independent healthcare professionals who provide services at this facility are participating with your health plan, this healthcare facility has provided you with a complete list of the names and contact information for each individual or group.

## PRIOR AUTHORIZATION

Most managed care insurance companies, health maintenance organizations (HMOs) require prior authorization for certain procedures. It is your responsibility to be familiar with your insurance coverage and whether or not your insurance company requires a prior authorization. Examples include CAT scans, MRIs, elective surgical procedures, and inpatient admissions. This list is not all-inclusive. You will need to contact your insurance company to see what services require prior authorizations.

## HOSPITAL CONTRACTED PHYSICIANS

The following are contracted physicians and physician groups that provide services at Richland Parish Hospital. You may receive separate billings from them. You will need to check with your health plan to see if these providers are contracted with your health plan.

### ANESTHESIA

**Riverside Anesthesia, LLC**  
107 Front Street  
Vidalia, LA 71373  
318-336-2222

### RADIOLOGIST

**Brown Folse Radiology**  
324 Dulles Drive  
Lafayette, LA 70506  
877-554-8444

### SPECIALISTS

**Raj Bhandari, M.D.**  
Gastroenterology & Nutritional  
616 South Washington Street  
Bastrop, LA 71220  
318-283-2177

**John D. Fagan, M.D.**  
2220 Hwy 61 North  
Vicksburg, MS 39183  
601-883-5940

### TELEMEDICINE

**Ocshner Medical Center Telestroke**  
1514 Jefferson Highway  
New Orleans, LA 70121  
504-842-4000

**LSU Medical Center Telehealth**  
1501 Kings Highway  
Shreveport, LA 71101  
318-675-5000

### PATHOLOGY

**Delta Pathology Group, LLC**  
309 Jackson Street  
Monroe, LA 71201  
318-841-9526

**Bayou Pathology**  
109 Circle Drive  
West Monroe, LA 71292  
318-323-1834

**Inform Diagnostics**  
Metroplex Pathology Associates  
6655 N MacArthur Blvd  
Irving, TX 75039  
800-979-8292

**Poplar Healthcare, LLC**  
3495 Hacks Cross Road  
Memphis, TN 38125  
901-526-7444

## FINANCIAL ASSISTANCE OPTIONS

Delhi Hospital offers financial assistance programs to help our low-income, uninsured patients pay their hospital bills. These programs are called the Patient Financial Assistance and Script Assist Programs.

The Patient Financial Assistance Program is designed to assist patients who have no health insurance, who have applied for but are deemed ineligible for governmental assistance (for example, Medicare or Medicaid), who demonstrate financial need and who supply Delhi Hospital with pertinent information about household finances. This assistance program is based on the federal poverty guidelines.

The Script Assist Program is designed to help qualifying patients with their rising prescription medication costs. These patients may be eligible for Script Assist and discounts offered by pharmaceutical companies. To qualify for this program you must meet at least one of the following requirements: No prescription coverage, little or no income, or have documented financial hardship. All patients must have a physician's referral to enroll in this program.

In addition, Prompt Pay Discounts are offered to uninsured individuals who do not meet the criteria for the Patient Financial Assistance Program. We offer a prompt-pay discount if your account is paid within 30 days of your bill date.



To see if you qualify for these programs please call our Patient Financial Assistance Program Director at 318-878-6218.

## DEPOSITS AND REFUNDS

Some patients must pay a deposit when they register for services. The amount of this deposit depends on:

The type of insurance or other medical coverage you carry or the type of medical services you need.

If the deposit you make turns out to be more than your final bill, we will send you a refund check after your insurance company has settled its portion of the claim. A refund will not be given if you owe other bills at the hospital or clinic. If we owe you a refund and no insurance coverage is involved, you will receive the refund as soon as your account charges are complete.

## EMERGENCY SERVICES

Delhi Hospital as a Medicare provider participates in the Emergency Medical Treatment and Active Labor Act (EMTALA). Under this act, a hospital must provide certain services. If you have a medical emergency or are in labor, you have the right to receive:

- An appropriate medical screening examination
- Necessary stabilizing treatment
- Appropriate transfer to another facility

You are entitled to these services even if you cannot pay, do not have medical insurance, and are not entitled to Medicare or Medicaid.

## YOUR RESPONSIBILITIES

Make sure you have your current insurance cards with you at all times. Know your insurance benefits. It is your responsibility to know your insurance company's requirements and procedures.

Make sure your doctor and Delhi Hospital are listed as participating providers in your plan's provider book.

If your insurance company requires prior authorization, let your doctor's staff know so prior authorization can be obtained.

If your insurance company requires a copay or out-of-pocket expense, payment will be expected at time of service.

If you need financial aid and can't pay for a portion or any of your bill, please apply to Delhi Hospital's Patient Assistance Program.

## QUESTIONS

If you have questions call Monday through Friday between 8:00 a.m. and 4:30 p.m.

**Registration questions:**

318-878-6377

**Medicare questions:**

318-878-6431

**Medicaid questions:**

318-878-6264

**Commercial Insurance questions:**

318-878-6435

**Payment Arrangements:**

318-878-6259

**Financial Assistance:**

318-878-6218

**Prompt Pay Discounts:**

318-878-6377