Insurance and Billing Information
Thank you for choosing Cleveland Clinic for your healthcare needs. We appreciate the confidence you have placed in us.

This brochure has been prepared to answer many common questions that patients have about insurance and billing for our services. Please let us know if we can answer any additional questions to help make the financial side of your experience with us as easy as possible, so you can focus on health and wellness.

Insurance and Billing

Financial Review Services
If you have an insurance plan that is not contracted with Cleveland Clinic health system or if you do not have insurance ("a self-pay patient"), you will be asked to meet with one of our financial counselors prior to scheduling your appointment. He or she will prepare an estimated cost of services for you and will request a deposit covering half of those expenses. If you are unable to pay the deposit, he or she can discuss whether you are eligible for government or Cleveland Clinic health system financial assistance programs.

Cleveland Clinic offers a unique program to support its patients, as part of the financial review services. If, during the evaluation, the financial counselor determines that you are eligible for COBRA (a 1986 federal law that allows for the temporary extension of health care benefit) and are unable to make the monthly payments, we will evaluate you whether are a candidate for Cleveland Clinic to assume your COBRA payments for a specific course of care and duration of time. If you do not qualify, you will be evaluated for other assistance programs available.

Referrals and Authorizations
Most managed care plans, health maintenance organizations (HMOs) and point of service plans (POS) require that your primary care physician refer you to receive specialty care. Each plan is different, and it is your responsibility to know the requirements for your plan and obtain any necessary referrals. You may be responsible for payment or your appointment may have to be rescheduled if you do not get the necessary approvals.

Many insurance plans also require prior authorization for services. If your insurance company does not approve your care, we will notify you in advance and you will be responsible for payment, should you choose to proceed with services.
Patient Out-of-Pocket Financial Requirements
Most insurance companies require patients to pay a portion of their doctor’s visit or hospitalization costs. The patient’s responsibility can be described as a co-payment, co-insurance or deductible. You will be asked to pay your co-pay amounts prior to your appointment, procedure or admission. If you do not, we may have to reschedule the appointment. When applicable, your co-insurance or deductible will be billed to you as appropriate, after your insurance pays your claim. You may contact a financial counselor to discuss payment and financial options.

Estimates, Deposits and Refunds
Our financial counselors are trained to prepare estimates for you if you have a financial responsibility. These are only estimates and may not represent the full scope of charges you actually incur.

If the deposit turns out being more than your final bill, you will be refunded once the insurance balance has been settled. If there was no insurance involved, we will refund your money once all charges have been totaled.

Provider Based Billing
Cleveland Clinic has designated its Main Campus, Community Hospitals and Family Health Center buildings as hospital outpatient departments. Patient bills include two separate charges, one for the healthcare provider, the other for a facility fee to partially defray the costs of providing non-physician staff, equipment and supplies. Our goal is to be up front with our patients about what their costs may be prior to receiving care. Most Medicare patients, those who have secondary insurance to Medicare, will have no out-of-pocket expense. We will work with our patients to determine how their insurance company will cover this fee. If you have questions, contact a financial counselor or Customer Service.

Wellness Services
Although you have insurance coverage, please remember that most insurance companies require patients to pay a portion of their doctor’s visit or hospitalization costs. In addition, your insurance company may not cover Wellness services, or may pay them at a reduced benefit level.

You will be asked to pay your co-pay amounts prior to your appointment.

Payment Options
For your convenience, you may make payment to Cleveland Clinic health system in a variety of ways:

- Cash, check or money order
- All major credit cards
- Electronic checks
- myaccount.clevelandclinic.org
- 3-month payment plan
- Loan through USBank
- Contact Credit and Collections at 216.738.5300 or 1.866.737.4358 to establish a payment plan or to learn about our Loan Program.

Billing – All Cleveland and Florida Hospitals and Outpatient Facilities
Effective October 1st, 2010, regardless of where you receive services throughout the Cleveland Clinic health system, you will receive one bill for all Cleveland Clinic physician and hospital services. Any Cleveland Clinic physician who treats you in the outpatient or inpatient setting will bill you through Cleveland Clinic health system. This same bill will include equipment charges and hospital stay charges. Independent community physicians will continue to bill you separately.

If you have questions about your bill, would like to update your insurance information, or would like an itemized statement, please call Customer Service at 216.445.6249 or 1.866.621.6385.
Language and Deaf Interpreters
Language and deaf interpreters are available for our patients. Please notify the appointment scheduler or nurse if you require such services.

International Patients
Cleveland Clinic Global Patient Services (GPS) offers a wide range of support services for international patients and their families, focusing on the patient’s cultural needs. GPS has a full-time, multi-lingual staff that is dedicated to facilitating all financial aspects of an international patient’s visit. GPS financial counselors assist with pre-payment arrangements for self-pay patients or insurance verification as appropriate. Interpreters are available to assist with communications in many languages. Other available services include help with scheduling medical appointments, airline and hotel arrangements and ground transportation, as well as activities for family members assisting the patient. For more information, please contact Global Patient Services in Cleveland at 216.444.6404 or send an email to interna@ccf.org. In Florida call 954.659.5080.

Financial Assistance Program
Cleveland Clinic Health System has a generous financial assistance program. The following criteria must be met in order for a patient to be eligible for assistance:

- At Ohio facilities, must be a resident of Ohio.
- At Florida facilities, must be a resident of Broward or Palm Beach counties and proximity to other providers will be considered as part of determination.
- At Nevada facilities, must be a resident of Nevada and reside within a 150-mile radius of Cleveland Clinic facilities.
- Family income at or below 400% of the Federal Income Poverty Guidelines.
- Must comply with the Medicaid eligibility process with the Cleveland Clinic health system designated vendor or on-site representative.

A financial assistance application can be obtained from Credit and Collections by calling 216.738.5300 or 1.866.737.4358 or by visiting clevelandclinic.org. In Florida, call 954.689.5166 for an application.

If you qualify for financial assistance, you will be asked to reapply for each surgical or inpatient service and every 90 days for outpatient services or prior to an admission/procedure. You will also be required to reapply if your family income changes. If you qualify for less than 100% financial assistance coverage, you will be asked to pay 50% of the uncovered estimated balance prior to service.

You will receive a letter from us indicating whether you have qualified for financial assistance and the level of coverage available.

Government Assistance Programs
The Cleveland Clinic Health System is a participant in the Ohio Hospital Care Assurance Program (HCAP). By completing the financial assistance application, you will be considered for HCAP. You must be a resident of Ohio to be eligible for HCAP.

You will also be screened for Ohio, Florida or Nevada Medicaid assistance. You will be asked a few questions by the financial counselor and if you meet the initial criteria, you will be referred to one of our Medicaid vendors, Human Arc of Ohio or Firstsource Solutions. They will work with you and the state to secure Medicaid coverage. Please comply with the vendor and the process in order to remain eligible for Cleveland Clinic health system financial assistance. In Florida, we do not contract with a Medicaid vendor, but we do have a representative on site to assist you.
Note that until you are approved for Medicaid, you will continue to receive a bill from us. The Cleveland Clinic health system does not contract with out-of-state Medicaid plans. Patients with out-of-state Medicaid will need to obtain services within their home state, except in situations where the service is not provided in the patient’s home state.

What You Can Do to Assure a Smooth Billing Process
You have several responsibilities to assure that the billing process goes smoothly. Those responsibilities include:

- When making an appointment and when presenting for your appointment, providing the most recent insurance cards, picture ID and making sure that we have the correct address for you.
- Understanding your insurance benefits, limitations and procedures. Contact your insurance company prior to your health visit so you are familiar with its requirements.
- Confirming with your insurance company that Cleveland Clinic health system is a contracted provider of services for your plan.
- Obtaining a referral, if required. Discuss this with your primary care physician prior to scheduling an appointment with one of our specialists.
- Knowing the limitations of the referral and obtaining an extension or expansion of the scope of the referral if needed.
- Being prepared to make payment prior to service if your insurance company requires a co-pay or out-of-pocket expense. Services may be postponed if payment is not made.
- Contacting the Cleveland Clinic Credit and Collections Department at 216.738.5300 or 1.866.737.4358 to make arrangements if you cannot pay your balance in full. All patients are responsible for balances due on their accounts, and payment is due upon receipt of the bill. Cleveland Clinic health system employs third-party collection agencies to help us resolve unpaid balances.

Patient Education Sessions
At Cleveland Clinic, our goal is to create a seamless clinical and financial process for our patients. Because medical billing and insurance often can be confusing, our Patient Financial Services department holds free educational forums to help people better understand the insurance and billing processes.

Each program is tailored for a unique need, and reservations are suggested for all programs. Please call 216.636.1121 to reserve your place. For a full calendar of upcoming educational sessions, please go to http://my.clevelandclinic.org/patients/billing_legal/billing/free_forums_billing_insurance.aspx

Do you have an upcoming surgery?
If you are scheduled for surgery at any of our Cleveland Clinic inpatient or ambulatory surgery locations, take advantage of this free educational forum where you will learn how to read your evidence of coverage; find out what your insurance requirements are (referrals, pre-certifications and out-of-pocket costs, for example); and have your questions answered by insurance experts.

Puzzled by health insurance and billing?
At this free educational forum, open to everyone, you will learn how to read your evidence of coverage, explanation of benefits, and Cleveland Clinic billing statement; find out what specific insurance terms mean; and have your questions answered by insurance experts.

Are you close to retirement age?
If you are 63 or older and are still employed or do not have Medicare, this free educational forum will help you prepare for the transition from commercial insurance to Medicare. You will learn the difference between Medicare and a Medicare HMO; find out
if you need a supplemental plan; discover what is not covered by Medicare; and have your questions answered by Medicare experts.

Need help understanding your hospital bill?
Hospital bills are sometimes confusing. Our customer service and billing experts can help you understand your Cleveland Clinic billing statements. They also will explain co-insurance and deductibles and how those items are displayed on your bill.

Lost your health insurance?
If you've recently lost your health insurance, you need to know that you have coverage options. Our experts will explain the charity care programs available through the government and Cleveland Clinic, and how to apply for them and maintain your coverage.

Choosing healthcare you can afford
What does an X-ray of a leg cost? How much is an overnight stay in the ICU? Determining the cost of medical care is complicated, but more and more people need to know beforehand the cost of their treatment so they can make an informed decision about where to receive it. Our experts will explain how costs are determined and tell you where to find the information you need to comparison shop.

Using Cleveland Clinic’s Website Tools
Do you want to take advantage of Cleveland Clinic’s online tools but don’t know where to start? If so, we can help. Get familiar with Cleveland Clinic’s website and learn how to sign up for and use MyChart and MyAccount. Soon you’ll become a proficient navigator of Cleveland Clinic’s online tools.

Additional Questions
If you have questions about any of the information in this brochure or about your bill, please contact Customer Service at the numbers below. We will be happy to assist you.

Customer Service
216.445.6249 | 866.621.6385