

Financial Assistance Policy

Patients without insurance coverage may qualify for financial assistance including Medicaid, FAMIS, or our Indigent Care or Charity Care programs. We can assist you with applying for these programs.

The Financial Assistance Policy is designed to assist patients who do not have insurance and are unable to pay all or a portion of their bill. We use the federal poverty guidelines issued by the U.S. Department of Health and Human Services to determine a patient's eligibility for Indigent Care and Charity Care discounts. The patient is responsible for providing information to assist in making the decision. Patients qualify for an Indigent Care discount if their level of income is less than 200% of the poverty level based on their family size. Patients qualify for a Charity Care discount if their level of income is more than 200% of the federal poverty level but less than 300% of the federal poverty level for their family size.

If you are unable to pay all or a portion of your bill or wish to set up a payment arrangement, please contact a Financial Counselor at the phone number on your statement. We ask for your cooperation in providing any information and other assistance requested.

More information, including a copy of our Financial Assistance Policy and application are available on our website. You may request a free copy be sent to you by mail. No eligible individual will be charged more for care than the amount generally billed to Medicare.

Customer Service

The Patient Accounting office is available to assist you with questions concerning your hospital bill or with financial assistance.

Patient Accounting Office Location:

Thomas W. Leggett Center
300 E. Ferrell Street
South Hill, Virginia, 23970

Office Hours:

8:00 am to 4:30 pm - Monday - Friday

Contact Numbers:

Office number (434) 447-3151
Financial Specialist (434) 447-0922

Financial Counselor:

Last name begins with:
A-G (434) 447-0814
H-O (434) 447-0811
P-Z (434) 447-0812

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Financial Assistance Summary



Thank you for choosing VCU Health Community Memorial Hospital as your health care provider.

We are committed to fulfilling our mission of providing excellence in the delivery of health care.

Our ability to continue providing health care services to the community is dependent upon our receiving payment for the services provided.

We will seek payment from those patients who can afford to pay and will seek alternative sources of funding or financial assistance for those patients who cannot afford to pay.

We understand that the billing and collection practices for healthcare services can be very complicated and confusing.

We have provided this information to help explain:

- Your financial obligations for health care services;
- Our process for billing;
- Programs that are available to you for financial assistance; and
- How to contact us for additional information and assistance.

Registration

We may contact you to obtain information from you prior to your admission or outpatient visit to reduce the amount of time you must spend on the day of admission or service. We will collect all necessary information for billing your insurance company.

We will also provide you with information regarding what your deductible, co-payment or deposit amount will be so that you can pay that prior to or at the time of your visit. Because the final amount that will be due from you is difficult to estimate at the time of service, you will be billed later for any additional amount owed. If you do not have any insurance coverage, we will inform you of ways to request financial assistance.

On the day of admission or service, please remember to bring with you:

- Photo identification, such as a drivers license;
- Your social security card;
- All active insurance cards; and
- Any physician orders you may have been given.

The Hospital Bill

If you have insurance coverage:

We will bill your insurance company on your behalf, including Medicare and Medicaid. We will not send you a statement until your insurance company has paid. If you have a secondary insurance carrier, we will bill them after your primary insurance company has paid.

You should receive an “Explanation of Benefits” notice from your insurance company that provides the amount it has paid and the balance you owe. Most insurance plans will cover the majority of your hospital bill; however, few cover the entire bill. If there is a balance due (for deductibles, co-insurance or non-covered charges) after your insurance companies have paid, a statement will be sent directly to you for the balance.

Payment is due within 30 days. For your convenience, we accept cash, personal check, debit card, money orders, Visa, MasterCard, Discover and American Express.

If you do not have insurance:

A statement will be sent to you shortly after services are rendered or after you are discharged. As soon as you receive it, please contact our Financial Specialist at (434) 447-0922 to discuss financial options that may be available to you.

Physician Bills

Depending on the services you received you may receive additional bills for professional services separate and apart from the hospital bill. These could include a separate bill from your personal physician and other specialists such as: radiologist, pathologist, anesthesiologist and emergency room physician. If you have any questions regarding any of your physician bills, please call the telephone number on the physician’s bill.