



### FINANCIAL ASSISTANCE POLICY

Erlanger is committed to meeting the health care needs of the communities we serve. Emergency medical care is provided to everyone, regardless of ability to pay or lack of insurance.

We realize that paying for medical bills may be difficult. If you are unable to pay yours, you may apply for financial assistance by completing an application and providing all the required information. This does not include flat rate pricing packages or cosmetic procedures. Get an application, a plain language summary of the policy and the full Financial Assistance Policy, in English or Spanish, and certain other languages at <http://www.ernlanger.org/fap> or by calling 423-778-5150. We may use your application to identify available health insurance including Medicaid, disability, victims of crime, COBRA, etc. It is important for the hospital and the patients to work together to solve payment issues.

Once we review your completed Financial Assistance Application, we will notify you of the results. If you qualify for financial assistance, all collection efforts will stop.

### A MESSAGE FOR YOU...

Your contract is now delinquent. If payment is not received within 10 days, your account can be placed with collection services.

View your statements, health information, and pay securely online with MyChart! Sign up for MyChart using activation code "A123-B456-C789-D012" at [mychart.Erlanger.org](http://mychart.Erlanger.org).

### YOUR ACCOUNT SUMMARY

Statement Date:	12/15/2016
Patient Name:	John Doe
Guarantor Name:	John Doe
Guarantor ID#:	012345678
Account Numbers:	See reverse side for details
Payment Due Date:	12/29/2016

Total Charges:	\$2,000.00
Patient Payments:	\$0.00
Insurance Payments:	\$1,600.00
Adjustments:	\$40.00

**AMOUNT DUE: \$360.00**

### YOUR PAYMENT OPTIONS

**Online at:** <https://myChart.Erlanger.org>  
(available 24/7)

**By Phone:** (423) 778-5150

**By mail:** Please complete coupon below and return with your check made payable to: ERLANGER HEALTH SYSTEM.

### ERLANGER MYCHART

#### Stay Connected. Manage Your Care.

Access your health information anytime and anywhere, at home or on the go, with MyChart.

You can use MyChart to:

- Message your clinic
- View your lab results
- Schedule your appointment
- Pay your bill online

▼ Please detach and return the bottom portion of this statement with your payment ▼



975 East Third Street  
Chattanooga, TN 37403

Guarantor Name:	JOHN DOE 2		
Guarantor ID #:	012345678	Due Date:	12/29/2016
Amount Due:	\$360.00	Amount Enclosed:	

Login to MyHealth if your insurance or address information has changed or check the box and indicate changes on the back of this page.

**Please make checks or money orders payable and remit to:**

ERLANGER HEALTH SYSTEM  
PO BOX 59018  
KNOXVILLE TN 37950-9018



JOHN DOE  
123 E MAIN ST APT B  
CHATTANOOGA TN 37403-0123

0000000200000000123456781



### Erlanger Facilities

Erlanger Baroness Campus  
975 E. Third St.  
Chattanooga, TN 37403  
423-778-7000

Erlanger T.C. Thompson Children's Hospital  
910 Blackford St.  
Chattanooga, TN 37403  
423-778-6011

Erlanger North Campus  
632 Morrison Springs Rd.  
Red Bank, TN 37415  
423-778-3300

Erlanger Bledsoe Campus  
128 Wheelertown Rd. PO Box 699  
Pikeville, TN 37367  
423-447-2112

Erlanger East Campus  
1755 Gunbarrel Rd.  
Chattanooga, TN 37421  
423-778-8400

Erlanger Bledsoe-Sequatchie Campus  
16931 Rankin Ave  
Dunlap, TN 37327  
423-949-2000

### Other Billing Inquiries

Emergency Physicians, Inc.  
PO Box 13811  
Philadelphia, PA 19101-3811  
800-355-2470  
Monday-Friday 9:00 a.m. - 4:00 p.m. EST

423-892-5602  
Monday-Friday 8:00 a.m. - 4:30 p.m.

Team Health  
P.O. Box 740023  
Cincinnati, OH 45274-0023  
888-952-6772

Tennessee Interventional & Imaging  
Associates, PLLC (TIIA)  
975 E. Third St., Box 376  
Chattanooga, TN 37403  
423-778-6213  
Monday-Friday 8:00 a.m. - 5:00 p.m.

Anesthesia Consultants Exchange, P.C.  
PO Box 11225  
Chattanooga, TN 37401

FOR CHANGE OF ADDRESS, MISSPELLINGS OR OTHER ERRORS, PLEASE PRINT CORRECTIONS.

Guarantor's Name			Phone # ( )
Guarantor's Address	City	State	Zip Code

#### IF YOU HAVE NOT SUPPLIED INSURANCE INFORMATION, PLEASE DO SO HERE:

PRIMARY INSURANCE COVERAGE		Patient's Relationship to Insured <input type="checkbox"/> SELF <input type="checkbox"/> SPOUSE <input type="checkbox"/> CHILD <input type="checkbox"/> OTHER		SECONDARY INSURANCE COVERAGE		Patient's Relationship to Insured <input type="checkbox"/> SELF <input type="checkbox"/> SPOUSE <input type="checkbox"/> CHILD <input type="checkbox"/> OTHER	
Insurance Company Name	Phone # ( )	Insurance Company Name	Phone # ( )				
Insurance Company Address		Insurance Company Address					
Policyholders Name	Birthdate / /	Policyholders Name	Birthdate / /				
Policy & Group #	Policy Effective Date / /	Policy & Group #	Policy Effective Date / /				
Employer's Name	Phone # ( )	Employer's Name	Phone # ( )				
Employer's Address		Employer's Address					





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 Statement date: 12/15/2016  
 Guarantor number: 012345678  
 Responsible party: JOHN DOE 2  
 Patient name: JOHN DOE 2

**Statement Details**

Date	Description	Charges	Pmts/Adjs	Patient Balance
<b>Account #987654</b>				
Physician Services for WILLIAM SMITH MD on Service Date 11/30/2016				
11/30/2016	Total Charges	\$ 500.00		
	Total Insurance Payments		\$ 400.00	
	Total Patient Payments		\$ 0.00	
	Total Adjustments		\$ 0.00	
	Sub-Total	\$ 500.00	\$ 400.00	\$ 100.00
<b>Account #876543</b>				
Physician Services for WILLIAM SMITH MD on Service Date 11/30/2016				
11/30/2016	Total Charges	\$ 500.00		
	Total Insurance Payments		\$ 400.00	
	Total Patient Payments		\$ 0.00	
	Total Adjustments		\$ 0.00	
	Sub-Total	\$ 500.00	\$ 400.00	\$ 100.00
<b>Account #321098</b>				
Hospital Services for Erlanger Baroness Campus on Service Date 11/28/2016				
11/28/2016	Total Charges	\$ 500.00		
	Total Insurance Payments		\$ 400.00	
	Total Patient Payments		\$ 0.00	
	Total Adjustments		\$ 0.00	
	Hospital Prompt Pay Discount - 10%		\$ 40.00	
	Sub-Total	\$ 500.00	\$ 440.00	\$ 60.00
<b>A 10% Hospital Services discount has been applied to this account #321098. If this hospital account is paid in full by 12/29/2016 the discount will be upheld. This discount does not apply to professional services performed."</b>				
<b>Account #210987</b>				
Hospital Services for Erlanger Baroness Campus on Service Date 11/28/2016				
11/28/2016	Total Charges	\$ 500.00		
	Total Insurance Payments		\$ 400.00	
	Total Patient Payments		\$ 0.00	
	Total Adjustments		\$ 0.00	
	Sub-Total	\$ 500.00	\$ 400.00	\$ 100.00
<b>This account no longer qualifies for the 10% Hospital Services Prompt pay discount since the discount has expired. Erlanger Health System's policy states that if the account is paid in full within 30 days the hospital account will be discounted by 10%.</b>				
<b>TOTAL</b>		<b>\$2,000.00</b>	<b>\$1,640.00</b>	<b>\$360.00</b>