

PATIENT BILLING & FINANCIAL ASSISTANCE INFORMATION

YOUR RIGHTS AND RESPONSIBILITIES:

Howard County General Hospital makes every effort to see that your account is properly billed. You are responsible for making sure the insurance information provided to Howard County General Hospital is correct. However, we cannot guarantee payment from your insurance company. All unpaid charges on the statement will be your responsibility.

Howard County General Hospital provides a reasonable amount of its services free, or at a reduced charge to eligible persons who cannot afford to pay for medical care. Financial Assistance eligibility is based upon documented family circumstances and family size. Additionally, to qualify for this assistance, all other sources of payment must be exhausted, including Medical Assistance. In certain circumstances, Medical Financial Hardship Assistance may also be available. Financial Assistance Eligibility applications can be obtained by contacting Customer Service between 8:30 AM to 4:30 PM, Monday through Friday, at the numbers listed below.

If you have any questions concerning this bill and charges for services rendered by Howard County General Hospital, please call our Customer Service office between 8:30am to 4:30pm Monday thru Friday at 443-997-0300 or toll free at 1-866-323-4615.

Mail only payments to:

Howard County General Hospital
P O Box 630831
Baltimore, MD 21263-0831

Mail correspondence/insurance information directly to Customer Service:

Howard County General Hospital
3910 Keswick Road, Suite S-5100
Baltimore, MD 21211

For information concerning Maryland Medical Assistance Program contact your local Department of Social Services at 1-800-332-6347, TTY: 1-800-925-4434 or visit: www.dhr.state.md.us.

If any checks are returned due to NSF (Non-Sufficient Funds) or stop payment, the patient will be charged the maximum fee permitted under Maryland law.

HOSPITAL STATEMENTS DO NOT INCLUDE PHYSICIAN FEES OR CHARGES:

This statement represents only those charges for services billed through Howard County General Hospital. Services rendered by your doctors are billed separately. Questions concerning physician fees must be directed to the appropriate office. Please contact Johns Hopkins Emergency Medical Services with questions concerning your emergency physician's fees at 1-888-834-7110.

If you need to contact Howard County General Hospital on matters not related to this statement, please call our general information number at (410) 740-7890.

Howard County General Hospital is introducing another way to contact our Customer Service Department. You may now email us directly at: customerservice@jhmi.edu Questions regarding your account should include your account number, patient name, date of service, statement date, insurance information, and a description of the charges billed.

CHANGE OF NAME, ADDRESS, OR HEALTH INSURANCE INFORMATION (Please Print)

Name Change:		New Street Address		
City:		State:	Zip Code	New Phone Number (____) ____ - ____
Insured's Name:	Social Security: ____ - ____ - ____	Patient's DOB: / /	Relationship to Insured (circle one) Self Spouse Child Other	
Insurance Company Name and Address:			Policy Number:	Group Number:
Effective Date:	Insurance Company Phone Number: (____) ____ - ____			
Signed	Date	I authorize the release of medical information necessary to process this claim. I assign and authorize direct payment to this hospital of any insurance or other benefits otherwise payable to me or the patient.		

