Understanding Your Hospital Bills



The information in this section will help you understand commonly used insurance terms, the billing process, types of coverage and whom to contact for assistance.

Commonly Used Terms

Coordination of Benefits (COB)

determine the primary payer of services when you're covered under two or more insurance companies, such as Medicare and Commercial. COB's prevent duplicate payments. You will be asked to choose which insurance coverage you want to use when you're admitted.

Co-payment:

A fee you pay for specific service, usually due at the time of service.

Co-insurance:

The portion of your medical expenses that you're personally responsible for paying. For example, your insurance may cover 80 percent of a bill, while you pay the remaining 20 percent.

Deductible:

The amount you owe each year before your insurance begins making payments.

Explanation of Benefits (EOB)

These are not bills. They show the amount billed by your doctor or hospital and how much is covered by your insurance how much you owe.

Billing Process

Hospital bills include charges for your room, meals, 24-hour nursing care and medicines. X-rays and lab tests. You'll receive bills for doctors, surgeons and specialists separately from the hospital.

Types of Coverage

WMCHealth works with many commercial insurance companies, Medicare and Medicaid. We will work with your insurance plan to determine how your bill will be paid. It is important that you understand the terms of your insurance coverage, as your plan may have special requirements.

Medicare

If you have Medicare, you'll complete a Medicare Secondary Payer (MSP) form at admission. This ensures that Medicare only pays for services not covered by other insurance you may have. If you have secondary insurance, this usually covers Medicare deductibles.

If you don't have secondary insurance, you need to pay these amounts yourself.

Important Message from Medicare

(English | Spanish)

Medicare Lifetime Reserve Days Information (English | Spanish)

Commercial Insurance Providers

If you use a commercial insurance provider, then the hospital forwards your claim to the insurance provider

After you leave the hospital, you'll get an explanation of benefits (EOB) statement from your insurance provider. This will show the amount covered by your insurance and the amount you owe.

Self-Pay Patients and Payment

If you're planning to pay your bills without help from Medicare or a commercial insurance provider, then you'll get bills directly from the hospital.

When the first bill arrives, call the hospital's Financial Services Department at 914.493.2089 or 914.493.5449 to set up a payment plan.

Financial Assistance

If you don't understand your bill, contact the Billing Department at 914.493.2089 or 914.493.5449.

Financial Assistance Program Information (English | Spanish)

If you need assistance paying your bill, contact the Financial Counseling Department at 914.493.7830 or 914.493.8296. A patient representative can work with you and guide you to services that can help. **Click here** to learn more.