

McLaren Print System Order

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 4100 John R
 Detroit, MI 48201

Brochures
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GLOSSARY

Coinurance: The percentage of costs of a covered health care service you pay after you have paid your deductible.

Co-payment: A fixed amount you pay for a covered health care service after you have paid your deductible.

Cost Sharing: The share of costs covered by your insurance that you pay out of your own pocket. This term generally includes deductibles, co-payments, and co-insurance, or similar charges, but it does not include premiums, balance billing amounts for non-network providers, or the cost of non-covered services. Cost sharing in Medicaid and CHIP also includes premiums.

Deductible: The amount you pay before your insurance plan starts to pay.

Fee for Service: A method in which doctors and other health care providers are paid for each service performed. Examples of services include tests and office visits.

Health Insurance: A contract that requires your health insurer to pay some or all of your health care costs in exchange for a premium.

Hospital Care: Health care that you get when you're admitted as an inpatient to a health care facility, like a hospital or skilled nursing facility.

Medicaid: Insurance program that provides free or low-cost health coverage to some low-income people, families and children, program varies by state, and people with disabilities. Many states have expanded their Medicaid programs to cover all people below certain income levels. You can apply anytime. If you qualify your coverage can begin immediately, any time of year.

Medically Necessary: Health care services or supplies needed to diagnose or treat an illness, injury, condition, disease or its symptoms and that meet accepted standards of medicine.

Medicare: A federal health insurance program for people 65 and older and certain younger people with disabilities. It also covers people with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a transplant, sometimes called ESRD).

Network: The facilities, providers and suppliers your health insurer or plan has contracted with to provide health care services.

Primary Care: Health services that cover a range of prevention, wellness, and treatment for common illnesses. Primary care providers include doctors, nurses, nurse practitioners, and physician assistants. They often maintain long-term relationships with patients and treat you on a range of health-related issues and also coordinate your care with specialists.

Plan: A benefit your employer, union or other group sponsor provides to you to pay for your health care services.

Premium: The amount you pay for your health insurance every month. In addition to your premium, you usually have to pay other costs for your health care, including a deductible, co-payments, and co-insurance. If you have a Marketplace health plan, you may be able to lower your costs with a premium tax credit.

Uncompensated Care: Health care or services provided by hospitals or health care providers that don't get reimbursed. Often uncompensated care arises when people don't have insurance and cannot afford to pay the cost of care.

Helpful resources:

McLaren offers financial assistance options. Detailed information is available online or by calling the Financial Counseling office at the subsidiary you are seen at:

McLaren Bay Region:	(989) 894-3815
McLaren Caro Region:	(989) 672-5121
McLaren Central Michigan:	(989) 772-6792
McLaren Flint:	(810) 342-2266
McLaren Lapeer Region:	(810) 687-5759
McLaren Greater Lansing:	(517) 875-3628
Karmanos Cancer Institute:	(313) 576-9032
McLaren Macomb:	(586) 493-8119
McLaren Northern Michigan:	(231) 487-4241
McLaren Oakland:	(248) 338-5403
McLaren Port Huron:	(810) 987-5000 Ext: 62958
McLaren Thumb Region:	(989) 269-8933 Ext: 4579

McLaren Patient Accounts: (800) 591-8707
 Facility: 586-273-6048
 Professional: 586-698-0150



MHCC-510-2020



Spec Info: