

**COMMONSPIRIT HEALTH  
GOVERNANCE POLICY ADDENDUM**

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**ADDENDUM Finance G-003A-A**      **EFFECTIVE DATE:**  
7/1/2021

**SUBJECT:** Hospital Facility Financial Assistance Contact Information

St. Bernardine Medical Center

Pursuant to CommonSpirit Governance Policy Finance G-003, *Financial Assistance*, the contact information of Mercy General Hospital is as follows:

- Copies of the Financial Assistance Policy, Financial Assistance Application, Billing and Collections Policy, and Plain Language Summary are available on the Hospital Facility's website at:  
<https://www.dignityhealth.org/socal/locations/stbernardinemedical/patients-and-visitors/for-patients/billing-and-payment/financial-assistance>
- A copy of the Provider Listing is available at:  
<https://www.dignityhealth.org/socal/locations/stbernardinemedical/patients-and-visitors/for-patients/billing-and-payment/financial-assistance>
- Patients may obtain additional information regarding the Hospital Facility's AGB percentage and how the AGB percentages were calculated from a financial counselor at: (909) 883-8711 ext 14408
- All patients/Guarantors that are interested in obtaining financial assistance or have questions about financial assistance, the application process, billing and payment plan options, actions in the events of non-payment, and other applicable programs that may be available with respect to their accounts may:
  1. Contact the Hospital Facility in person at: Financial Counselor Office
  2. Call the financial counselor of the Hospital Facility at: (909) 883-8711 ext 14408
  3. Visit the Hospital Facility's website at:  
<https://www.dignityhealth.org/socal/locations/stbernardinemedical>
  4. Mail requests to: St. Bernardine Medical Center, PO Box 3008, Rancho Cordova, CA 95741-3008
- Patients/Guarantors denied Financial Assistance may also appeal their eligibility determination. Disputes and appeals may be filed by contacting Customer Service Mgr 888-488-7667 or the Financial Assistance Center at: PO Box 3008, Rancho Cordova, CA 95741-3008

**ASSOCIATED DOCUMENTS:**

CommonSpirit Governance Policy Finance G-003, *Financial Assistance*  
CommonSpirit Governance Policy Finance G-004, *Billing and Collections*



## **California Hospital Fair Billing Program**

### **ATTENTION:**

If you need help in your language, please call (909) 883-8711 ext 14408 or visit the financial counselor office. The office is open 8am-4:30pm and located at St. Bernardine Medical Center, 2101 N. Waterman Avenue , San Bernardino, CA 92404 Aids and services for people with disabilities, like documents in braille, large print, audio, and other accessible electronic formats are also available. These services are free.

### **Help Paying Your Bill**

There are free consumer advocacy organizations that will help you understand the billing and payment process. You may call the Health Consumer Alliance at 888-804-3536 or go to [healthconsumer.org](http://healthconsumer.org) for more information.

### **Hospital Bill Complaint Program**

The Hospital Bill Complaint Program is a state program, which reviews hospital decisions about whether you qualify for help paying your hospital bill. If you believe you were wrongly denied financial assistance, you may file a complaint with the Hospital Bill Complaint Program. Go to [HospitalBillComplaintProgram.hcai.ca.gov](http://HospitalBillComplaintProgram.hcai.ca.gov) for more information and to file a complaint.