

## **Financial Services**

Our dedicated financial representatives are here to assist you before, during, and after your visit to The Methodist Hospital. If you'd like more information about payment options or have questions about billing, please contact us at +1-713-441-2340 or methodistinternational@tmhs.org.

## **Types of Charges**

- **Hospital charges** derive from services provided by hospital employees, such as nursing care, room and meal charges, pharmaceutical and medical supplies, and use of medical and surgical equipment.
- Professional charges accrue from services rendered by hospital-based medical staff such as
  anesthesiologists, radiologists, pathologists, and other assisting or consulting physicians involved
  in your treatment.
- Admitting physician, surgeon, or consultant charges derive from services provided directly by your physician or surgeon as part of your treatment. These charges must be paid at the time the services are rendered.

For your convenience, your financial representative will consolidate all hospital and professional charges into a single bill; your physician charges will be billed to you directly by the doctor's office.

## **Methods of Payment**

Your financial representative will discuss payment options with you thoroughly and help you decide which is best for you.

- **Self-payment:** This option requires a pre-admission deposit that represents an estimate of costs for hospital and professional services based on your diagnosis and proposed treatment. The Methodist Hospital accepts cash, personal checks, traveler's checks, MasterCard, Visa, American Express, and Discover.
- **Insurance:** The Methodist Hospital participates in several international insurance programs. Please provide your insurance information at least two days before receiving medical services; we also recommend that you contact your insurance company to communicate your intent to receive services and to verify medical benefits.
- Letters of Guarantee: The Methodist Hospital accepts Letters of Guarantee from foreign embassies and corporations as a form of payment, provided they are received before treatment begins. The letter should include:
  - o Contact name and number
  - o Specific period of time that the patient is guaranteed
  - o Address for claim submission
  - o Expected length of time to process payment