Important Information About What We Charge For Services.

St. Mary’s Healthcare has an established charge for every service and product that it provides. The list of these services and products, and the amount charged for each, are contained in the Hospital’s Chargemaster. A copy of the Hospital’s Chargemaster is available upon request. To request a copy of the Hospital’s Chargemaster please contact the Reimbursement Coordinator at 518-841-7450.

Total Charges for a specific hospital stay or visit will depend on the various products and services provided during that stay or visit. Only services ordered by a physician, or other authorized provider, will be charged for. These may include diagnostic tests and procedures, surgical procedures, therapeutic services, medical supplies and pharmaceuticals. For each hospital stay or visit, a detailed listing of all services and products provided and the amount charged for each can be obtained by calling the number provided on the billing statement or requesting the information in person at Patient Financial Services.

During the course of a hospital stay or visit, some services may be provided by physicians other than those employed by St. Mary’s Healthcare. Professional services provided by providers that are not employed by St. Mary’s Healthcare will be billed separately. Information about those charges must be obtained from those providers of service.

What you ultimately pay for a hospital stay or visit depends on many factors, including whether you have insurance, the type of insurance you have and the coverage it provides, the contractual relationship between the providers of service and your insurance plan and the out-of-pocket cost requirements of your plan. Insured patients should work with their health plan to determine what they will ultimately pay for a specific service.

For uninsured patients, the ultimate amount payable will depend on discounts provided under the Carondelet Care Financial Assistance Policy, which includes discounts provided to all uninsured patients, prompt pay discounts, if applicable, and Financial Assistance discounts provided to patients who apply and meet certain eligibility requirements. All uninsured patients will receive information from the hospital to assist them in accessing discounts for which they may be eligible.