



NOTICE TO PATIENTS

YOUR RIGHTS AND PROTECTIONS AGAINST SURPRISE MEDICAL BILLS

OVERVIEW:

Certain federal and state laws provide patients protections against “Surprise Medical Bills” and “Balance Billing.”

If you have insurance and you receive emergency care from a hospital, physician or other clinical provider who is not in your health plan’s network, you have protections against bills in excess of the in-network rate.

If you have insurance and receive in-network care at a Torrance Memorial Medical Center licensed facility but some part of the care is from a physician or other provider who is not in your network, you likely have additional protections depending on your health plan.

If you receive emergency services at Torrance Memorial Medical Center and you are not insured, our policy is to provide financial assistance to patients whenever possible. We will reach out to you to discuss our financial assistance programs. If you are admitted, we will work to ensure that you understand your rights and financial options. We want you to feel comfortable asking your physician about whether s/he is in or out of network and for clear information on your anticipated out-of-pocket costs.

WHAT IS THE CONCERN OVER “SURPRISE BILLING” OR “BALANCE BILLING”?

There are a variety of situations where a patient will receive a bill that is not expected or understandable. Federal and California laws have been enacted to help protect patients from receiving care from providers they did not choose who are also not in the patient’s network and thus whose services are not billed at the health plan’s in-network rate.

EMERGENCY SERVICES AND RELATED CARE:

If you get emergency services from an out-of-network provider or facility, the most the provider or facility may bill you is your plan’s in-network cost-sharing amount (such as copayments and coinsurance). You can’t be balance billed for these emergency services. This includes services you may get after you’re in stable condition, unless you give written consent and give up your protections not to be balance billed for these post-stabilization services.

WHEN TORRANCE MEMORIAL MEDICAL CENTER IS IN-NETWORK BUT A PHYSICIAN OR OTHER PROVIDER IS NOT:

Torrance Memorial Medical Center contracts with many health plans. When we are contracted, you still may be seen by a physician or other licensed clinician who does not have a contract with your health plan. In these cases, the most those providers may bill you is your plan’s in-network cost-sharing amount. These providers can’t balance bill you unless you give written consent to be billed at a higher out-of-network rate. The consent forms should clearly explain that consenting means you give up your protections. You should not feel pressured to enter into these consents. You should feel free to ask that provider questions about your expected out-of-pocket costs and to request from your insurance a referral to a provider who is in-network.

If you want to confirm whether Torrance Memorial Medical Center is an in-network provider under your health plan, please contact: 310-517-1010.

You’re never required to give up your protections from balance billing. You also aren’t required to get care out-of-network. Other than when you are taken to an emergency room, you can generally choose a provider or facility in your plan’s network.

If you believe you’ve been wrongly billed or want additional information, you may contact any of the following:

- The provider who sent you the bill. For bills from Torrance Memorial Medical Center, contact numbers will be on your bill.
- Your health plan.
- The federal CMS agency overseeing this has this informational site: <https://www.cms.gov/nosurprises/consumers>
- CMS also offers the following hotline for complaints: 1-800-985-3059

Copies: If you would like an electronic or paper copy of this Notice, please request from the employee who performed your registration.