

ATTACHMENT C
REDLANDS COMMUNITY HOSPITAL
350 TERRACINA BOULEVARD
REDLANDS, CALIFORNIA 92373

OB COST-SAVER PACKAGE PLAN

REQUIREMENTS FOR ELIGIBILITY:

The entire cost must be paid on or before discharge. Please be advised that prices will apply to the date of admission, not the date of payment. The Cost-Saver Package Plan applies to patients having normal vaginal deliveries or Cesarean section patients, with no complications. Should either the mother or baby become ill, regardless of whether payment has been made or not, the discount will be nullified and the patient's financial class reverts to self-pay. Patients covered under insurance plans with **NORMAL MATERNITY COVERAGE** are not eligible for the OB Cost-Saver Package Plan. **No itemized billing will be provided.**

- Charges incurred for conditions unrelated to the maternity visit are not included in the original OB Cost-Saver Package Plan, *i.e.*, Tubal Ligations and OBSERVATION visit.
- The hospital does not bill for, or include in its charges, fees for professional services rendered by independent contractors and more specifically those physicians and surgeons furnishing professional services to the patient, including the radiologist, pathologist, emergency room physicians, anesthesiologist, dentist, hearing screenings, podiatrist, and the like. **The undersigned understands that all such professional services will be billed separately.**

SUMMARY OF ELIGIBILITY REQUIREMENTS:

- A. Payment in full on or before discharge. (Cash, Check, Cashier's Check, Money Order, Visa, MasterCard or American Express).
- B. Normal delivery and a well-baby, or Cesarean section and a well-baby.
- C. No insurance involved.

CASH PAYMENT SCHEDULES (Mother and baby charges combined):

		Mom & Baby
1 Day	Normal Delivery	\$3,500
2 Days	Normal Delivery	\$4,500
3 Days	Normal Delivery	\$5,500
2 Days	Cesarean Section	\$6,000 + \$1,200 for each additional day. For each additional baby per day \$600
3 Days	Cesarean Section	\$7,000 + \$1,200 for each additional day. For each additional baby per day \$600

NOTE: Patients who elect to have tubal ligation must pay for this service on or before discharge along with the OB Cost-Saver Package Plan discount.

Any payment made by check written to Redlands Community Hospital and returned unpaid by the bank will void the OB Cost-Saver Package Plan discount. Prices are subject to change without notice. If you have any questions, please call (909) 335-6414