When you need it most, turn to who cares most.

CHARITY CARE. We want our patients to receive the medical care they need regardless of their financial status. Therefore, to further the hospital's mission, Garden City Hospital is proud to offer our Charity Care Program for those who qualify.

Our Charity Care Program gives prorated discounts to qualified uninsured and underinsured patients who are not eligible for medical assistance through the state or county health insurance programs, and who are within 200% percent of the national poverty guidelines.

Patients may be eligible for Charity Care if they have no insurance, or have high co-pays/deductibles associated with their insurance. Medicare patients without secondary insurance may also be eligible for the Charity Care Program.

TO FIND OUT IF YOU QUALIFY. Contact one of our Financial Counselors at billing@gchosp.org or call 734-458-4436.

Cardiology
Counseling
Diagnostic Services
Emergency Services
Home Health Care
Home Medical Equipment
Hyperbaric Treatment
Laboratory Services
Neurology/Neurosurgery
Oncology (cancer)
Ophthalmology
Orthopedics
Pain Management
Pediatric Care
Pharmacy
Rehabilitation Services
Sleep Disorders
Sports Medicine
Women's Health
Wound Care

Garden City Hospital

Great Health. Generation to Generation.

6245 Inkster Road
Garden City, MI 48135

www.gchosp.org

Physician Referral Line: 1-877-717-WELL
Main Hospital: 734-458-3300

1/12 9067

Health Care at Garden City Hospital

Options for the uninsured and underinsured

Garden City Hospital

Great Health. Generation to Generation.

Garden City Hospital is there for you in your time of need.

COMMUNITY ASSISTANCE PRICING (CAP) PROGRAM. Today, health care is more expensive than ever, making it tougher for you to stay healthy. At Garden City Hospital, we don't want you to sacrifice your wellness because you are worried about the bills.

That's why we have a reduced pricing program for those who do not have insurance. Garden City Hospital believes the easier it is for you to pay for services, the better you can maintain good health.

With our Community Assistance Pricing Program, you don't have to choose between your family's health and your budget. Now, you can have both!

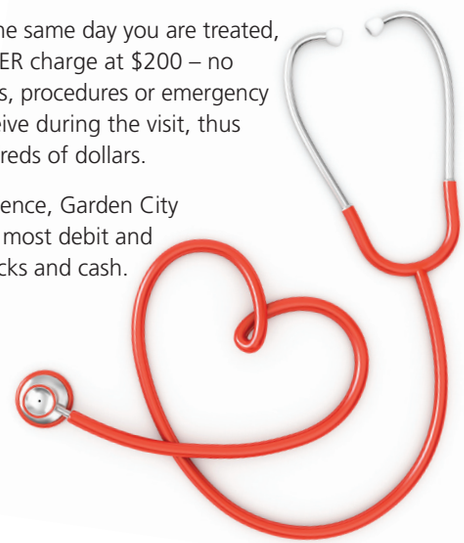
If you do not have medical insurance, you may qualify to save 40-80% on many medical services and procedures. There are two ways to participate in the CAP Program:

1. Pay in advance of your appointment.
2. Pay at the time services are provided.

"CAP" YOUR EMERGENCY ROOM (ER) VISIT. The last thing you need to worry about when arriving for emergency medical care is how much it will cost.

When you pay the same day you are treated, we "CAP" your ER charge at $200 – no matter what tests, procedures or emergency services you receive during the visit, thus saving you hundreds of dollars.

For your convenience, Garden City Hospital accepts most debit and credit cards, checks and cash.



Community Assistance Pricing (CAP)

DEPARTMENT	DESCRIPTION	GCH FULL LIST PRICE	CAP PRICE
CARDIOLOGY*	Cardiac Rehab Phase II	$ 74	$ 39
	Dobutamine Stress Test	$ 2,387	$ 227
	EKG (Electrocardiogram)	$ 109	$ 15
	Exercise Stress Test	$ 2,387	$ 227
	Tilt Table	$ 1,024	$ 166
DIABETES EDUCATION	Diabetic Education (Individual Session)	$ 80	$ 40
	Diabetic Education (Group 2 ½ Hr Session)	$ 125	$ 62
	Medical Nutrition Therapy (1 Hr Session)	$ 80	$ 40
DIAGNOSTIC IMAGING (X-RAY)	Cardiac CT	$ 1,500	$ 730
	Chest X-ray	$ 158	$ 35
	CT with Contrast	$ 1,370	$ 199
	CT without Contrast	$ 1,200	$ 139
	Mammogram Annual Screening	$ 217	$ 35
	Mammogram Diagnostic	$ 318	$ 40
	MRI with Contrast	$ 1,780	$ 287
	MRI without Contrast	$ 1,610	$ 234
	Pyelogram (IVP)	$ 511	$ 129
	Ultrasound	$ 573	$ 75
	Urography (IUV)	$ 341	$ 129
	Venous Doppler	$ 614	$ 106
	X-ray 1-3 views	Varies	$ 35
	X-ray 4-5 views	Varies	$ 53
EEG*	EEG (electroencephalogram)	$ 749	$ 94
EMERGENCY ROOM	Emergency Room Visit	$ 900	$ 200
INPATIENT REHAB*	Inpatient Rehabilitation (Per Day)		$ 784
LAB	Routine Lab Test (Per Test)		$ 10
OBSTETRICS & GYNECOLOGY*	C-Section including newborn	$ 11,038	$ 6,450
	Fetal Stress Test	$ 367	$ 65
	Fetal Ultrasound	$ 446	$ 54
	Rhogam Injection including lab	$ 315	$ 60
	Tubal Ligation	$ 4,800	$ 1,386
	Vaginal Delivery including newborn	$ 8,487	$ 3,950
OUTPATIENT SURGERY*	Cataract Surgery (Per Eye)	$ 4,650	$ 954
	Colonoscopy, Diagnostic	$ 800	$ 363
	Cystoscopy with Treatment (Treatment of Kidney Stones)	$ 8,710	$ 1,023
	Hernia Repair	$ 5,937	$ 1,285
	Knee Arthroscopy	$ 5,200	$ 1,882
	Laparoscopic Cholecystectomy	$ 7,008	$ 1,859
	Rotator Cuff Repair	$ 9,476	$ 1,838
	Shoulder Arthroscope	$ 7,084	$ 1,882
	Upper GI Endoscopy, Diagnostic	$ 800	$ 363
RESPIRATORY*	Pulmonary Function Test (PFT)	$ 1,200	$ 56
SLEEP CENTER	Sleep Study	$ 2,867	$ 640
THERAPY	Occupational Therapy (Per Visit)		$ 75
	Physical Therapy (Per Visit)		$ 75
	Speech Therapy (Per Visit)		$ 75
WOUND CARE CENTER	Hyperbaric Oxygen (Per Visit)	$ 2,100	$ 236
	Wound Care Visit Basic (Per Visit)		$ 45
	Wound Care Visit Intermediate (Per Visit)		$ 65
	Wound Care Visit Extensive (Per Visit)		$ 92

If you don't see a procedure you're looking for, contact one of our Financial Counselors at billing@gchosp.org or call 734-458-4436.

* There are additional fees for physician services. Prices are subject to change without notice.