

《财务援助政策》 – 附件 B

审批人:	上次审批日期:	签发日期:	版本: 2024-1
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复印件仅供参考。请参阅最新版本的电子版。

《财务援助政策》附件 B

《财务援助政策》未涵盖的提供商

《财务援助政策》(FAP) 适用于 Rush Specialty Hospital。下文所列的执业医生集团提供的服务不在本《财务援助政策》涵盖范围内。

虽然 Rush Specialty Hospital 提供商提供的服务不在本《财务援助政策》涵盖范围内，但可能在《Rush Specialty Hospital 财务援助政策》涵盖范围内。如需核实该提供商是否属于 Rush University Medical Center 提供商，请访问 <https://www.rushspecialtyhospital.com/patients-and-caregivers/financial-assistance/> 查看 Rush Specialty Hospital 财务援助政策。

此列表自 2024 年 5 月 1 日起生效。如果您在此处未看到某一提供商，并希望核实该提供商是否在本《财务援助政策》涵盖范围内，请联系我院住院办公室。

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