

To: Florida Hospital Commission[flhospitalcommission@ahca.myflorida.com]
From: [REDACTED]
Sent: Tue 10/27/2015 2:34:14 PM
Importance: Normal
Subject: Report Price Gouging Submittal (AHCAPHI)
MAIL_RECEIVED: Tue 10/27/2015 2:34:19 PM

Submittor Information

Name: [REDACTED]
Phone Number: [REDACTED]
Email Address: [REDACTED]
County: [REDACTED]

Price Gouging Experience:

I went to [REDACTED] due to having kidney stones. The bill was \$15,000 and with my insurance, my portion was \$4,000.