



Reid Health

Financial Assistance Policy SUMMARY

Reid Health provides financial assistance to patients who don't have a way to pay for hospital and physician services. Regardless of an individual's ability to pay or qualify under our Financial Assistance Policy, we will provide, without discrimination, care for emergencies based on the U.S. government Emergency Medical Treatment and Labor Act (EMTALA) of 1986. No one will be excluded based on age, color, creed, ethnic background, gender, national origin, physical disability, race or religion. Patients without insurance (self-pay) will receive a discount off their gross charges. This discount applies to hospital and hospital-related physician services and is exclusive to any other discounts or acceptance for financial assistance.

Some Important Points about Our Financial Assistance Policy:

- **Cosmetic Services** are typically not covered by any insurance and are excluded from financial assistance.
- **The household unit** is defined as one or more people who live together and are related by birth, marriage or adoption (i.e. parents and children who are filed as dependents on their tax return); or live together and share assets, such as credit cards, bank accounts or real estate. Patients over 18, such as adult children living with their parents, siblings or friends are not considered part of the household unit unless they are legally obligated for the debts of the patient.
- **Income** includes salary and wages, interest income, dividend income, Social Security, workers compensation, disability payments, unemployment compensation income, business income (IRS Schedule C), pensions & annuities, farm income (IRS Schedule F), rentals & royalties, inheritance, strike benefits, and alimony income. Income is also defined as payments received from the state for legal guardianship or custody.
- **Patients who have exhausted policy limits and Medicare patients** can be eligible for financial assistance if eligibility requirements are met.
- **A patient's eligibility for assistance** will be determined through an application process that uses our official Financial Assistance Application form, which is made available to all patients. The form requires name, current address, valid contact information, names and ages of everyone in the household, a list of all income amounts and sources and a signature.
- **An indication of an inability to pay** for services will be treated as a request for assistance. This request may be made by or on behalf of the individual seeking services. A request for assistance may be made at any time but should be made no later than 30 days after service/discharge, or final bill.

- **Requests for assistance are not required in writing.** However, once a request has been made, an application must be completed and signed by the person making the request or their guarantor or guardian.
- **Patients can qualify for assistance or partial assistance based on their financial situation or on what’s considered a “catastrophic” situation.** To be eligible for assistance under the *financial* assistance guidelines, your income must be at or below a percentage of the Federal Poverty Level (FPL) as determined by Federal Poverty Guidelines. A patient qualifying for catastrophic assistance is a person whose bills exceed a specified percentage of annual gross income as set forth in this policy and who is unable to pay the remaining bill. To be eligible for catastrophic assistance, the amount owed by the patient must exceed fifty percent (50%) of the patient's annual gross income and the patient must be unable to pay the remaining bill.
- **If you are financially able to purchase health insurance through the Health Insurance Marketplace, or other federal and state programs such as the Healthy Indiana Plan, you may be required to do so.** Our benefit specialists can help with that process. Verification of requested income and a complete list of all countable household members may be required.
- **Some circumstances may automatically qualify you for assistance,** including living in a shelter; being in jail; being homeless; being in jail after charges that happened before that.
- **Failure to provide appropriate information** may result in a negative determination, but the account must be reconsidered upon receipt of the required information.
- **Failure to pay the remainder of an account after Financial Assistance** may cause the account to be placed with a collection agency.

Financial Assistance Determinations

All complete applications will receive a determination for the award of financial assistance. The patient will be provided a written copy of the final determination. Printed copies of the Financial Assistance Policy and Application may be obtained from the Patient Financial Services office at 600 East Main in Richmond, from Patient Advocates in the hospital at 1100 Reid Parkway, by calling customer service at (765) 983-3184, and online at www.ReidHealth.org/financialassistance.

Denials of assistance can be appealed in writing to:
 Director of Revenue Cycle
 1100 Reid Parkway
 Richmond, IN 47374.