# Greene County Medical Center Financial Assistance Policy Plain Language Summary - 2022

Greene County Medical Center offers Financial Assistance to patients who have health care needs and need assistance paying for care. Financial Assistance is the cost of providing free or discounted care to individuals who qualify. This is a summary of the medical center's Financial Assistance Policy (FAP).

## **Availability of Financial Assistance**

You may be eligible for Financial Assistance and meet eligibility requirements discussed below. The medical center provides Financial Assistance for medically necessary procedures only. Optional services, such as cosmetic, will not receive Financial Assistance.

### **Eligibility Requirements**

Total income of the people living in the home is used to determine qualification. Example: If your income is at or below 175% of the Federal Poverty Income Guideline (FPIG), you may receive a 100% discount. The amount that a patient is expected to pay and the amount of Financial Assistance offered depends on the patient's insurance coverage, income, and assets. Patients that qualify for Financial Assistance will not pay more than the amounts generally billed for their emergency or medically necessary care. Please refer to the medical center's full Financial Assistance Policy for a complete explanation and details.

Financial Assistance Discount:		100%	80%	60%	40%	20%
	%FPIG	175%	200%	225%	250%	275%
	1	23,783	27,180	30,578	33,975	37,373
# in Household	2	32,043	36,620	41,198	45,775	50,353
	3	40,303	46,060	51,818	57,575	63,333
	4	48,563	55,500	62,438	69,375	76,313
	5	56,823	64,940	73,058	81,175	89,293

#### Household Income

# Where to Find Information

There are different ways to find information about the FAP application process or get copies of the FAP and application. To apply for Financial Assistance you may: Download the information online at <u>www.gcmchealth.com</u>, get a copy at outpatient, ED, and Rehab registration areas, or request the information by mail, free of charge, by contacting the medical center's Patient Financial Counselor at (515) 386-0278.

# How to Apply

You will need to fill out a Financial Assistance form. Applicants may be required to apply for Medicaid before Financial Assistance through the medical center will be considered. If you need help with the form, you may contact the Patient Financial Advocate at the number listed above. Return completed application with necessary documents to the Business Office or mail to: Business Office, 1000 West Lincoln Way, Jefferson, IA 50129.

#### **Availability of Translations**

The Financial Assistance Policy, application form, and Plain Language Summary are also offered in Spanish. Greene County Medical Center may elect to use a qualified bilingual interpreter by request. For information about the translation of the medical center's Financial Assistance forms, please go to <u>www.gcmchealth.com.</u>