

Greene County Medical Center Financial Assistance Policy Plain Language Summary

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%

# in Household	%FPIG	175%	200%	225%	250%	275%
	1	21,245	24,280	27,315	30,350	33,385
	2	28,805	32,920	37,035	41,150	45,265
	3	36,365	41,560	46,755	51,950	57,145
	4	43,925	50,200	56,475	62,750	69,025
	5	51,485	58,840	66,195	73,550	80,905

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 www.gcmchealth.com, 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 or Patient Accounts Representative at (515) 386-0117.

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 or Patient Accounts Representative at the numbers 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 www.gcmchealth.com.