**Purpose:** Consistent with its mission to provide high quality health and wellness services for the extended community, Health Quest is committed to providing financial assistance to every person in need of medically necessary treatment even if that person is uninsured, underinsured, ineligible for other government programs, or unable to pay based on their individual financial situation.

**Policy:** It is the policy of Health Quest to provide the level of aid necessary to the greatest number of patients in need, and protect the resources needed to do so. For self-pay patients, Health Quest will apply “presumptive eligibility” for financial assistance to the entire service area of each Health Quest hospital. This level of financial assistance will reduce the amount billed to the patient to the Prospective Medicare reimbursement rate.

Health Quest shall comply with all other federal, state, and local laws, rules, and regulations that may apply to activities conducted pursuant to this policy. The following guidelines apply:

- Services are provided under financial assistance only when deemed medically necessary and after patients are found to have met all financial criteria based on the disclosure of proper information and documentation.
- Patients may be expected to contribute payment for care based on their individual financial situation. (example: New York State Medicaid spend down requirements).

**Procedure:** Services eligible for financial assistance include: emergency or urgent care and services deemed medically necessary by Health Quest. Patients who are uninsured, underinsured, ineligible for government assistance programs, or unable to pay based on their individual financial situation are eligible for financial assistance. Determinations for eligibility are made on a case-by-case basis and may require appointments or discussion with hospital’s Customer Service Dept. Health Quest does not take into account race, gender, age, sexual orientation, religious affiliation, social or immigrant status.

- **Determine Discount Amount** (see Appendix A)
  - Patient who can demonstrate their family income is at or below 200% of the federal poverty line are eligible for a 100% discount on any patient balance.
  - Patients demonstrating a family income between 201% and 300% of the federal poverty line are eligible for a 50% discount on any patient balance.
  - At the hospital’s discretion, patients with family income exceeding the 300% of the federal poverty line may still be eligible for discounts on an individual basis, taking into account extenuating circumstances.
Patients with a Medicaid spend-down will be reviewed on a case-by-case basis.

- Applying for Financial Assistance:
  - Patient must cooperate with the hospital to explore alternative means of assistance if necessary
  - Patient must complete the Health Quest issued application (see Appendix B)
  - Patient must provide required proof of identity and income (see Appendix C)
  - Health Quest shall issue either an approval or denial within thirty (30) days after all necessary information is provided by the patient.
  - A denial letter shall include information concerning the appeal process available to the patient. The denial letter will include the phone number to the Dept. of Health.
  - Any patient who provides all requested information and is denied under this policy shall be entitled to appeal such decision in writing to the SBO. Every appeal will be assigned to the Customer Service Supervisor for re-consideration.
  - Any approval by Health Quest shall apply to all charges incurred by a patient for past services as well as to all charges rendered by Health Quest for six (6) months after the approval date.
  - Notification Period begins on the first date of care and ends on the 120th day after Health Quest provides the individual with the first billing statement for the care.
  - Application Period ends on the 240th day after Health Quest provides the individual with the first billing statement for the care.
  - During this period Health Quest will engage in collection actions against the individual, however will still accept and process a Financial Assistance Application if one is submitted.
  - Receipt of a complete or incomplete Financial Assistance Application would suspend collection activity, pending determination of eligibility.

- Patients concerned about their ability to pay for services or who would like to know more about financial assistance should be directed to the System Business Office at 845-475-9940.