

# CHARITY CARE/FINANCIAL ASSISTANCE POLICY

## GLACIAL RIDGE HEALTH SYSTEM

The mission of Glacial Ridge Health System (GRHS) is to provide the highest quality “heartfelt” care to the communities we serve. The vision of GRHS is to be the healthcare provider of choice by providing compassionate and comprehensive healthcare services.

GRHS realizes that in order to fulfill our mission, there are some situations that may require financial forgiveness, or charity care. Charity care is care for which a hospital does not charge because it has been determined that the patient cannot afford to pay. The level of charity care for a particular hospital may reflect a charitable mission of the hospital, or may reflect the socioeconomic conditions of the patients and the service area of the hospital. A low level of charity care does not necessarily mean a lack of commitment to serve the community. Charity care is an option to consider after all financial possibilities are exhausted.

Charity Care is intended to assist those low-income, underinsured, and/or uninsured individuals who do not otherwise have the ability to pay full charges as determined under the hospital’s qualification criteria. It should take into account each individual’s ability to contribute to the cost of his or her care.

Considerations should also be given in providing financial assistance on a case-by-case basis to patients who have exhausted their insurance benefits and/or who exceed financial eligibility criteria but face extraordinary medical costs. Hospital financial aid is **not** a substitute for employer-sponsored, public, or individually purchased insurance.

### **Who is eligible for charity care?**

GRHS will limit these programs to people not eligible for government medical assistance programs, those unable to pay their medical bills, or those with limited financial resources.

Services eligible for financial assistance include: emergency care, services deemed medically necessary and, in general, care that is non-elective and needed in order to prevent death or adverse effect to the patient’s health.

Patients who are uninsured or underinsured and have a household income between 101% and 200% of Federal Poverty Guidelines may receive discounted care based on a sliding scale. Patients with a household income at 100% of Federal Poverty Guidelines or below may qualify for 100% discount based on a sliding scale.

Uninsured patients who do not meet the above requirements may receive a 20% discount on gross charges for medically necessary and emergency care.

### **Determining Discount Amount**

When eligibility for charity care has been established, GRHS will not charge patients who are eligible for charity care more than the amounts generally billed (AGB) to insured patients for medically necessary and emergency care.

## **Applying for Charity Care**

To apply for charity care, patients must submit an application/determination of eligibility form (including supporting documents) to 10 Fourth Avenue SE, Glenwood, MN 56334 either in person or by mail.

Individuals can request an application by phone (320-634-4521) or by mail (send request to 10 Fourth Avenue SE, Glenwood, MN 56334 Attn: Patient Account Rep). They are available in person at the hospital registration desk and in the emergency department. Applications and information about Charity Care/Financial Assistance are available online at <https://www.glacialridge.org/patients>.

In addition to completing an application, the following information is required:

- 1040 Tax Return
- W-2's for any W-2 income listed on 1040
- Copies of the last 2 months of bank statements
- Most recent pay stub or statement of wages from all W-2 Employers
- Statement of disability or social security payments received
- Any invoices or statements relating to expenses claimed in the section above

Information about charity care can be accessed at the facility registration desks, in the emergency department, at the business office and in the patient's admission packet.

Charity Care applications are valid for 6 months.

Individuals who do not have the documents listed above, have questions about the application, or need assistance, may contact our patient account representative by phone at 320-634-4521 or in person at 10 Fourth Ave SE, Glenwood, MN 56334.

### **How does GRHS check on eligibility?**

1. GRHS identifies any uninsured, underinsured, or self-pay patients.
2. Patient completes application/determination of eligibility form.
3. Patient completes financial statement that includes income, assets, and liabilities. Patient supplies documentation of resources (i.e., W-2 pay stubs, tax forms, etc.) and outstanding obligations (i.e., bank statements, loan documents, etc.).
4. GRHS considers federal poverty guidelines and family size.
5. GRHS verifies third-party coverage, if indicated.
6. GRHS staff person interviews patient to assess if the patient: has the ability to pay in full, has the ability to pay reasonable monthly installments, or qualifies for financial assistance.
7. GRHS attempts to secure federal, state, or local funding, if appropriate.
8. After GRHS makes an initial determination of insufficient funds, income, and health care benefits, the claim becomes eligible for final review, often by a committee comprised of CEO and CFO, to see if it meets the federal poverty guidelines.

### **Who can authorize/distribute an application for charity care?**

Charity care applications are distributed at registration desks, in the emergency department, or from the Patient Account Representative. Upon completion of that application, it is the Patient Account Representative's responsibility to review, gather appropriate data and forward it to the CFO, who will review with the CEO - who will make the final decision for GRHS to either grant or deny charity care.

### **How much is designated for charity care annually?**

The Board of Directors will designate a monetary value specifically set aside for charity care annually. Once these funds have been assigned to applicants and funds have been depleted, no more will be allotted to the charity care fund until the next fiscal year.

### **Eligible Providers**

In addition to care delivered by Glacial Ridge Health System, emergency and medically necessary care delivered by the providers listed below are also covered under this charity care policy:

Glenwood Medical Center    Starbuck Medical Center    Brooten Medical Center

This policy does not apply to any fees from outside entities such as visiting doctors, specialists, reference labs, or radiologists.

### **Reminder**

Charity care policies do not eliminate personal responsibility. All patients are expected to contribute to their care based on their individual ability to pay.