

**Glacial Ridge Health System  
Glenwood, MN 56334**

<b>Title:</b> <b>CHARITY CARE/FINANCIAL ASSISTANCE POLICY</b>	<b>Policy # 120.01</b>			
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<b>Department/Indicator:</b> <b>BUSINESS OFFICE</b>	<b>Effective Date: 06-21-04</b>			
	<b>Reviewed/Revision/ Dates/Initials</b>			
<b>Distribution:</b> <b>BUSINESS OFFICE, ADMINISTRATION, BOARD OF DIRECTORS</b>	6/04	10/07 KM	7-11 NP	4-16 NP
	Revise 06/18 KH	Review 11/18 KH	Review 06/21 KH	Revise 10/21 KH

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, some situations may require financial assistance 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 the hospital's charitable mission or may reflect the socioeconomic conditions of the patients and the hospital's service area. 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 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 consider each individual’s ability to contribute to the cost of their 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 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 effects 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.

**Determining Discount Amount**

When eligibility for charity care has been established, GRHS awards discounts based on the table below. The discount is applied to services received in the preceding six months.

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Percentage of Poverty Guidelines	100%	120%	140%	160%	175%	180%	200%
Charity Care Award	100%	80%	60%	40%	25%	25%	25%

**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 at 320-634-4521 or by mail (send the request to 10 Fourth Avenue SE, Glenwood, MN 56334 Attn: Patient Account Rep). Charity care applications are also 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 two 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.

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

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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 available at the hospital registration desk, in the emergency department, or from a Patient Account Representative. Upon receipt of the completed application and required documents, it is the Patient Account Representative’s responsibility to review and forward it to the CFO. The CFO will review the charity care application and documents with the CEO. The CEO makes the final decision for GRHS to either grant or deny charity care.

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

The Board of Directors budgets a monetary value specifically for charity care annually.

**Eligible Providers**

This charity care policy includes emergency and medically necessary care provided at Glacial Ridge Hospital, Glenwood Medical Center, Starbuck Medical Center, and Brooten Medical Center.

This policy does not apply to 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.

Please see the Collection Policy for additional information.