

## PLAIN LANGUAGE SUMMARY OF FINANCIAL ASSISTANCE POLICY

### Overview

Any patient may ask for financial assistance. Anyone else who is responsible for paying for the patient's care may also ask for financial assistance under the Memorial Healthcare System's (MHS) Financial Assistance Policy.

This policy is available to anyone by calling the Patient Financial Services Department at (954)276-5501, Eligibility Department at (954)276-5760 or by asking in person in the admitting/registration areas of any of the MHS acute care facilities located off of the main lobby of each facility or at the Eligibility offices at 2900 Corporate Way Miramar. Staff members are available to discuss and explain the FAP Monday through Friday from 8am – 4:30pm.

The Financial Assistance Policy is also available through the MHS website at <https://www.mhs.net/patients-visitors/billing/financial-assistance>

Financial assistance is only available to the patient or responsible party if they are unable to pay for the patient's medical care. The ability to pay is determined by using the Federal Poverty Guidelines (FPG). The federal government updates these guidelines annually. The ability to pay is also determined by examining assets. Financial assistance will not be given for medical care unless it is medically necessary. Elective cases for patients that are not residents of the South Broward Hospital district will be reviewed on a case-by-case basis.

### Availability of Financial Assistance

If the patient or responsible party requests financial assistance, MHS will determine if the patient or responsible party has the ability to pay. This examination, or screening, for financial assistance is free of charge. The amount of the requested financial assistance must be more than \$500. Financial assistance is not available when the patient elects to pay at the self pay package rate that applies only when the payment is made prior to service or discharge.

Patients or responsible parties will be considered for discounts up to 100% if they have a total household income of less than 200% of the FPG. Patients or responsible parties will also be considered for discounts up to 100% if their total balance due is more than 25% of their total household's annual income. They will also be considered if their total household's annual income is not more than 4 times the FPG for a family of 4.

Patients or responsible parties will be considered for discounts from 75% to 90% when their total household's income is between 201% and 400% of the Federal Poverty Guidelines.

Please refer to the full policy for a complete explanation and details

### How to apply for Financial Assistance

The patient or responsible party need only notify the MHS Patient Financial Services Department at (954)276-5501, or the Eligibility Department at (954)276-5760 that they would like to apply for financial assistance. If they make this request or tell us that they might need help paying their bill, they will be given a Financial Evaluation Form. They will also be given a list of documents they will have to provide so MHS staff members can see if they meet the requirements for financial assistance.

Both the application and the list of required documents are available at <https://www.mhs.net/patients-visitors/billing/financial-assistance>

The patient or responsible party has up to 120 days to give MHS staff members all of the requested information. The MHS staff will then review the information and determine whether the patient or responsible party meets the financial assistance guidelines. MHS will tell the patient or responsible party in writing whether or not they qualify under the Financial Assistance Policy guidelines.

Once MHS determines that a Patient or responsible party is eligible to receive financial assistance under this Financial Assistance Policy, he or she will not be charged more than the Amounts Generally Billed (AGB). At MHS the AGB is determined through the "Look-back method" which calculates the average percentage of charges insurance companies pay and applies that percentage to the patient's accounts. The calculation is available at MHS.net or in the Registration areas of any of the facilities.

Please refer to the full policy for a complete explanation of the calculation.

The Financial Assistance Policy, Financial Evaluation Form, and this plain language summary shall be prepared in English, Spanish, French, Portuguese, Haitian Creole, Vietnamese and Russian. All of these documents are available at [www.mhs.net/patients-visitors/billing/financial-assistance/policy#languages](http://www.mhs.net/patients-visitors/billing/financial-assistance/policy#languages)