## MONROE COUNTY MEDICAL CENTER

## Financial Assistance Policy-Plain Language Summary

Monroe County Medical Center (MCMC) recognizes that not all patients have the financial resources to pay their hospital bill. MCMC 's Financial Assistance Policy exists to provide eligible patients, partially or fully – discounted emergent or medically necessary care. This summary provides information regarding our Financial Assistance Policy.

<u>Eligible Services</u> – Emergent and / or medically necessary services provided by MCMC hospital. Services not eligible for financial assistance include: professional services which are related to the hospital visit and billed by Louisville Radiology Imaging Consultants, Saint Thomas Health Services, Cardiovascular Specialists, Local Physicians when providing and billing their own services and the services provided by the Monroe County Medical Center Medical Practice.

<u>Eligible Patients</u> – Patients receiving eligible services, who submit a complete Financial Assistance Application (including related documentation/information), and who are determined to be eligible for Financial Assistance by meeting the requirements of MCMC's Financial Assistance Policy.

How to Apply - Financial Assistance Policy and Applications may be obtained as follows:

- Request and obtain them while you are being treated at the facility.
- Download the Policy and application from our website at <u>www.mcmccares.com</u>.
- Request the policy and/or application to be mailed to you, by calling our Patient Financial Counselor at 270-487-9231 ext.1141.
- Visit our Patient Financial Counselor in our Patient Financial Services department located in the Administration/Business Office building at 529 Capp Harlan Road, Tompkinsville, Kentucky 42167.
- Obtain the policy and a free paper financial assistance application at each hospital registration desk.
- Mail the completed applications (with all required documentation /information specified in the application instructions) to Patient Financial Services, Monroe County Medical Center, 529 Capp Harlan Road, Tompkinsville, KY 42167.

<u>Determination of Financial Assistance Eligibility</u> – Financial Assistance is generally determined by a sliding scale of total household income based on federal poverty guidelines and an evaluation of available assets. When total household income is 200% or less of the Federal Poverty Level a discount ranging from 50% to 100% from gross charges may apply. No individual eligible for financial assistance will be charged more for medically necessary care than "Amounts Generally Billed" (AGB) to insured persons, (AGB as defined by IRS Section 501(r)). MCMC's AGB is determined annually using the Look-back Method.