



Medina Surgery Center

Patient Accounting Services, Patient Financial Assistance Program

MEDINA SURGERY CENTER FINANCIAL ASSISTANCE POLICY

PURPOSE: The purpose of this policy is to define the Medina Surgery Center financial assistance program and process for applying.

POLICY: Medina Surgery Center is committed to providing financial assistance responsive to the needs of the community, to patients who have sought Medically Necessary care but have limited means to pay for their care. The Medina Surgery Center will provide, without discrimination, medically necessary care to individuals regardless of their ability to pay, or their eligibility under this policy.

FINANCIAL ASSISTANCE RELATED POLICIES:

The Medina Surgery Center offers other options for uninsured or underinsured patients who do not qualify for financial assistance under this Financial Assistance policy. For further information, please see the following Summa Health System policies:

- The Medina Surgery Center Billing and Collections Policy – Summa Health System will not engage in Extraordinary Collections Actions such as reporting to credit agency(ies), selling an individual's debt to another party, deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill, or actions that require a legal or judicial process, before it makes a reasonable effort to determine if a patient is eligible for financial assistance under this policy. Collection activity, including any Extraordinary Collections Actions, will proceed as described by Medina Surgery Center's Billing and Collection policy.
- Medina Surgery Center Uninsured Discount Policy –Patients are eligible for the Uninsured Discount for medically necessary services. Non-medically necessary services are not covered under the Financial Assistance Policy.

Further, this policy:

- Includes eligibility criteria for financial assistance
- Describes the basis for calculating amounts charged to patients eligible for financial assistance under this policy
- Describes the process for individuals to apply for financial assistance
- Describes the actions taken during the financial assistance application process
- Describes how Summa Health System will widely publicize the policy within the community

1. Eligibility for Financial Assistance

Financial Assistance will be considered for those individuals who are uninsured or underinsured with medical costs and who are unable to pay for their care, based on determination of financial need in accordance with this policy. This may include any of the following conditions:

- a. Individual has no third-party insurance coverage
- b. Individual is eligible for public assistance but a particular service is not covered
- c. Medicare or Medicaid benefits have been exhausted and the individual has no further ability to pay.
- d. Individual is insured but qualifies for assistance based on financial need to pay for the individual's balance after insurance.

2. Eligibility Criteria

a. Federal Poverty Limit Guidelines, definitions of family size and household income are used to determine an individual's eligibility (see Attachment A)

b. Medina Surgery Center calculates the amount generally billed using the look-back method based on claims allowed by Medicare fee-for-service during a 12-month rolling period. See Appendix A for a detailed explanation of how the amount generally billed is calculated.

c. The Medina Surgery Center Financial Assistance- the individual's household income must be greater than 250% and less than or equal to 400% of the current Federal Poverty Limits (FPL) to be eligible for a reduction (see Attachment A). No patient eligible for Financial Assistance will be charged more than the Amount Generally Billed (AGB). This results in a partial adjustment to billed charges for individuals with no insurance, or a partial adjustment to billed charges for individuals with insurance on the remaining patient responsibility after insurance payment.

d. Medina Surgery Center Financial Assistance- the individual's household income must be at or below 250% of the current Federal Poverty Limits (FPL) to be eligible for 100% reduction from applicable charges. This results in a full adjustment to billed charges for individuals with no insurance or a full adjustment to billed charges for individuals with insurance to the remaining patient responsibility after insurance payment.

e. Financial assistance application forms will be considered up to a minimum 240 days after the first post discharge billing statement, and considered valid up to six (6) months after the last date of application approval.

f. Income may be verified by requesting a personal financial statement or obtaining copies of the applicants most recent Form W-2, most recent tax form, bank statements or any other form of documentation that supports reported income. Summa Health System may accept verbal clarification of income, family size or any information that may be unclear on the application.

g. Documentation received supporting income verification and available assets is to be maintained in patient files for future reference.

i. The Medina Surgery Center reserves the right to consider a discount or discounted care to any individual who may fall outside of the parameters set forth in this policy, where such individual who has been identified, in the sole discretion of Surgery Center and approved by

the Vice President of Ambulatory and Support Services having exceptional medical circumstances (i.e. terminal illness, excessive medical bills and/or medications, etc.).

3. Applying for Financial Assistance

- a. A patient will complete the Medina Surgery Center financial assistance application form.
 - i. Presumptive eligibility may be used to justify and document financial assistance in certain circumstances (e.g., patient is homeless) in the absence of a completed financial assistance application form.
 - ii. Medina Surgery Center may utilize available resources (e.g., technology solutions, service organizations, etc.) to obtain such information as propensity to pay in order to assist determining whether a patient is presumed eligible for financial assistance.
- b. Patient Financial Advisors are available to provide assistance completing the financial assistance form. See page 6 for more information about Patient Financial Advisors.

4. The Medina Surgery Center Actions Taken During Financial Assistance Application Process

- a. Medina Surgery Center's Financial Assistance Policy is offered:
 - i. Included on Conditions of Registration Form.
 - ii. Included on the patient billing statement.
 - iii. Published <https://www.summahealth.org/medinasurgerycenter>

If no financial assistance application form has been submitted in at least a 120-day period following the date after the first post-discharge billing statement, Medina Surgery Center may follow the actions noted in the Billing and Collection Policy.

- b. Incomplete financial assistance application form submitted- When an incomplete financial assistance application form is submitted during the minimum 240-day period following the date on of the post-discharge billing statement (the application period), Medina Surgery Center will:
 - i. Provide the individual with a written notice that describes the additional information and/or documentation required under the Financial Policy and Form.
 - ii. If the individual does not provide the information needed to complete the financial assistance assessment within a reasonable timeframe, the surgery center may initiate or resume actions noted in the Billing and Collection Policy without benefit of a discount.

c. Complete financial assistance application form submitted- Medina Surgery Center will take the following actions:

- i. Suspend any Extraordinary Collection Actions, if taken
- ii. Suspend any collection activity during the time the Medina Surgery Center financial assistance application form is being processed
- iii. If the account is placed with a collection agency, the agency will be notified to cease the collection efforts when determination is made
- iv. Make and document determination of eligibility decision
- v. Notify the individual on a timely basis of the eligibility determination
- vi. When applicable, provide the patient with a billing statement that indicates the balance after application of Financial Assistance

- vii. Refund any excess payments to the individual
- viii. Take reasonable action to reverse any Extraordinary Collections Actions taken against the individual

5. The Financial Assistance Policy, financial assistance application form and Plain Language Summary of the Financial Assistance Policy are transparent and available to the individuals served in English, Spanish, Arabic, Nepali, Burmese and Karen languages. These are the languages appropriate for the Summa Health System service area.

a. Website: The Medina Surgery Center will prominently and conspicuously post complete and current version of the following on its website:

- i. Financial Assistance Policy (FAP)
- ii. Financial Assistance Application Form
- iii. Plain Language Summary of Financial Assistance Policy
- iv. Contact information for Medina Surgery Center Patient Financial Advisors

b. Signage: The Medina Surgery Center signage will be conspicuously displayed in public locations in its facility including all points of admission and registration areas.

c. In Person: Patient Financial Advisors will offer patients the Financial Assistance application, free of charge, which will be used to determine eligibility for all assistance programs. A person speaking limited/no English or who is hearing impaired will be provided with an interpretation method, free of charge.

Financial Assistance for Catastrophic Situations:

Medina Surgery Center defines Catastrophic Situations as incurred medical expenses that result in patient responsible debts of greater than 25% of the gross annual family income

Patient Financial Advisors

Patient Financial Advisors are available to answer your questions about financial assistance, payment arrangements, insurance coverage, Medicare and other financial inquiries. A person speaking limited/no English or who is hearing impaired will be provided with an interpretation method, free of charge.

For more information about financial assistance, please call or visit:

- Medina Surgery Center Campus
(330) 952-0014

Central Registration

3780 Medina Rd. Ste 120, Akron, OH 44309