

## **Munising Memorial Hospital**

### **Financial Assistance Policy**

**Effective 5/20/2024**

#### **POLICY:**

Munising Memorial Hospital is committed to the provision of health care services to all persons in need of emergency and/or medically necessary care regardless of ability to pay. The hospital is committed to providing free or reduced cost care to persons who have health care needs and are uninsured, under insured, ineligible for a government program, or are otherwise unable to pay for medically necessary care based on their individual financial situation.

Munising Memorial Hospital will not refuse, delay or discourage emergency and/or medically necessary services based upon a patient's ability to pay for the cost of such services in accordance with the Emergency Treatment and Active Labor Act (EMTALA).

#### **PROCEDURES:**

##### **Services Eligible Under This Policy:**

- Except as otherwise indicated below, all medically necessary services provided by Munising Memorial Hospital, Munising Memorial Hospital Emergency Department Providers and BayCare Rural Health Clinic Providers are potentially eligible for free or reduced cost care.
- Eligibility determination must be made in accordance with financial assistance program application, required additional documentation, and corresponding procedures.
- The following services are not eligible for free or reduced care because they are billed by organizations other than Munising Memorial Hospital - General Surgery professional fees, Anesthesiologist / CRNA professional fees, Dermatologist professional fees, Radiologist professional fees, Pathologist professional fees.

Communication to the Public: Information about Munising Memorial Hospital's financial assistance policy shall be made publicly available as follows:

- The Financial Assistance Policy, the Financial Assistance Policy Application Form, the Sliding Fee Scale for Financial Assistance, and a Plain Language Summary of the Financial Assistance Policy will be available on the hospital website.
- A paper copy of the Financial Assistance Policy documents will be available upon request and without charge, both by mail and in public locations throughout the hospital and rural health clinic.
- MMH will distribute a copy of the Plain Language Summary with the billing statements that notifies and informs recipients about the availability of financial assistance under the hospital's policy. The Plain Language Summary Notice will include the telephone number of the Patient Financial Counselor as well as a website address where copies of the Financial Assistance Policy Documents may be obtained.
- A conspicuous notice advising patients that MMH provides financial assistance and reduced fee or free care will be posted in key public areas of MMH, including Admissions, the Emergency Department, the Rural Health Clinic, and the Business Office.
- MMH will train front-line staff to answer financial assistance questions effectively or to direct any inquiries to the designated Patient Financial Counselor.
- Financial Assistance Policy documents will be made available in any language spoken by more than 5% of the population in the hospital's service area, and interpreted for other non-English speaking or limited English proficiency patients.
- The Financial Assistance Policy will be publicized in the communities served by the hospital and rural health clinic.

Determination of Financial Need: Financial need will be determined in accordance with procedures that involve an individual assessment of financial need, and will include an application process in which the patient or the patient's guarantor is required to cooperate and supply personal, financial and other information and documentation required for determining financial need. The request for financial assistance application and corresponding documentation must be completed and submitted within timelines established by Munising Memorial Hospital.

Application and Eligibility Criteria:

- Eligibility Criteria for Financial Assistance for free or discounted care will be determined, based upon completion of a Financial Assistance Application.  
APPLICATION LINK
- Patients or their guarantors wishing to apply for financial assistance are encouraged to submit a Financial Assistance Application within ninety (90) days of their date of service or discharge. Patients or guarantors may submit an application up to two hundred forty (240) days from the date of the patient's first post-discharge billing statement. However, accounts may be subject to ECA (extraordinary collection actions) collection efforts, including notification of credit agencies, as soon as one hundred and twenty (120) days after patients or their guarantor(s) have been provided the first post-discharge statement.
- Applications for Financial Assistance must include proof of income documentation.
- "Income" is defined as gross income, or all income before taxes. This would include any interest, dividends, wages, compensation for other services, tips, pensions, fees for earned services, price of goods sold, income from rental property, gains on sale of other property, alimony, or royalties, etc.
- Patients must include the following documentation with their Financial Assistance Application:
  - Copy of most recent pay stub showing year to date income.
  - Copy of most recent signed federal tax return (including all pages and schedules).
  - Copies of documentation, income-generating statements or award letters to verify additional household income.
  - In the event that a patient has zero income, evidence that the patient has applied for Medicaid, and a signed statement from the patient indicating how they are surviving with zero income.
- "Household" includes all individuals listed on a patient or guarantor's federal income tax filing. Guarantor's of a minor dependent who do not claim the dependent on their federal taxes may submit a court decree as proof of the dependent's household status. In the event the patient's (except for minor patients) income does not warrant a filing of a federal tax statement, the patient/guarantor may submit a signed statement that indicates how they are surviving with no income.

Sliding Fee Scale:

- Services will be made available to qualified patients on a sliding fee scale, in accordance with financial need, as determined in reference to Federal Poverty Guidelines in effect at the time of determination. [SLIDING FEE SCALE LINK](#)
- The Sliding Fee Schedule used for Determination of Eligibility for Financial Assistance will be updated annually when the updated federal poverty guidelines are updated each year.
- Patients whose household income is at or below 100% of the federal poverty level are eligible to receive free care.
- Patients whose family income is between 100% and 300% of the federal poverty level will be eligible for a percent off discount.

#### Determination of Financial Assistance:

- A Determination of Financial Assistance will be communicated to the applicant within 10 days to all patients or guarantors who apply for financial assistance.
- Financial Assistance Application Approvals made under the Financial Assistance Policy will be effective for a period of 180 days and include subsequent emergent or medically necessary care.
- A new, updated application will be required after each 180-day period, or upon any change in the patient or guarantor's financial circumstances.
- Financial Assistance may be granted to a deceased patient's account, after all insurance balances are collected.
- Munising Memorial Hospital will deny or revoke Financial Assistance for any patient or guarantor who falsifies any portion of a Financial Assistance Application.