



FINANCIAL ARRANGEMENTS AND ASSISTANCE POLICY PLAIN LANGUAGE SUMMARY

Overview

In keeping with our purpose to *inspire health, serve with compassion and be the difference*, Prisma Health is committed to providing financial assistance to patients who cannot pay for all or part of their bill.

The information below outlines Prisma Health's Financial Arrangements and Assistance Policy.

Availability of Financial Assistance

Prisma Health understands the financial responsibilities that a healthcare visit may place on patients with no health insurance or with only partial insurance coverage (the uninsured and underinsured).

All patients who believe they may qualify for financial assistance are urged to fill out and submit a Financial Assistance Application.

Eligibility Requirements

Financial assistance is available for emergency and other medically necessary care provided by Prisma Health (and certain other providers) to both insured and uninsured patients who meet income and asset limit requirements. The review process includes evaluating potential coverage through the Healthcare Exchange, Medicaid and other funding sources.

In general, financial assistance is decided by a sliding scale of total household income based on Federal Poverty Guidelines (FPG) and other assets available to the patient.

The specific percentage discounts for income greater than 200% up to 400% of FPG are updated annually and are based on Medicare look-back methodology.

No person eligible for financial assistance under the Financial Arrangements and Assistance Policy will be charged more for emergency or other medically necessary care than Amounts Generally Billed (AGB) to individuals with insurance covering such care. If a person has enough insurance coverage or assets to pay for care, he or she may not qualify for financial assistance. Please refer to the Prisma Health Financial Arrangements and Assistance Policy for an explanation.

About the Application Process

The application process for financial assistance under our Financial Arrangements and Assistance Policy includes these four steps:

1. Complete the Financial Assistance Application Form and include required supporting documents. If required documents are not submitted, your application may be denied.

2. Your income, family size and other assets will be reviewed to decide the level of assistance available to you based on the FPG outlined in the Eligibility Requirements section of this document.
3. You must explore eligibility for insurance benefits or other funding sources that would cover your care (such as insurance coverage through the Healthcare Exchange, Medicaid, Workers' Compensation and automobile insurance). We have representatives who can help you find appropriate resources.
4. You will be notified if you qualify for financial assistance under our Financial Assistance and Arrangements Policy.

About the Billing Process/Payment Arrangements

Prisma Health offers options for both uninsured and underinsured patients who do not qualify for financial assistance. Representatives can help you arrange payment plans for any remaining balances of bills not covered under your insurance or financial assistance.

During the 120 days following your first notice, you will be contacted either by mailed billing statements and/or phone calls reminding you of your bill(s). During this 120 day period please pay your bill(s) in full, set up a payment plan or apply for financial assistance.

Bills not paid or set up on payment plans within 120 days after the first billing date may be reported on your credit history, placed with a collection agency or attorney, or filed as a lien against real estate or personal property. You may apply for financial assistance during the collection process by calling Customer Service at (864) 454-9604 or 1-844-302-8298 (toll free). The filing deadline is eight (8) months from the date of service.

Where to Get More Information

You may get a copy of our Financial Arrangements and Assistance Policy, Financial Assistance Application Form, Medicare and Private Insurance Bad Debt Policy, as well as information about the financial assistance application process these four ways:

1. Visit our website at <http://www.ghs.org/financial-assistance>
2. Call Prisma Health Patient Financial Services at (864) 454-9604 or 1-844-302-8298 (toll free).
3. Mail a request to Prisma Health, 255 Enterprise Blvd., Ste. 250, Greenville, SC 29615 Attn: Financial Counseling.
4. Contact a Patient Access Representative in person at any Prisma Health hospital. (For a list of facilities and addresses, see the full Financial Arrangements and Assistance Policy).

Prisma Health accommodates all significant populations served who have limited proficiency in English by translating copies of our Financial Arrangements and Assistance Policy, Financial Assistance Application Form, and this summary in the primary languages spoken by those populations.