



## **PLAIN LANGUAGE SUMMARY OF FINANCIAL ASSISTANCE POLICY**

Consistent with its mission to deliver compassionate, high quality, affordable healthcare services and to advocate for those who are poor and disenfranchised, Thomas health System is committed to providing without discrimination, emergency and medically necessary care to individuals regardless of their ability to pay. Financial assistance is available to individuals who have healthcare needs and are financial indigent, ineligible for a government program, and otherwise unable to pay for medically necessary or emergency care. The following guidelines for the provision of patient Financial Assistance have been established:

### **Who is eligible for Financial Assistance?**

Financial Assistance is available to patients who meet the following criteria:

- Applicants with a family income at 320% or below of the federal poverty guidelines;
- The patient resides in West Virginia

Patients outside these guidelines may also be considered on an exception basis.

### **How do I apply for Financial Assistance?**

If you feel you might be eligible for Financial Assistance, applications are available:

- On our website at [www.thomashealth.org](http://www.thomashealth.org)
- At each registration area at Thomas Memorial Hospital and Saint Francis Hospital
- By visiting a Financial Advocate at either hospital between 8AM and 4PM, Monday –Friday
- Or calling a Financial Advocate
  - Thomas Memorial Hospital – 304-766-3777
  - Saint Francis Hospital – 304-347-6688

Please complete all sections of the application form, including a signature and the date. Assemble all required documentation prior to submitting your application. If you need help, please contact a Financial Advocate at the number listed above.

Completed applications can be mailed or delivered to a Financial Advocate. The mailing address is:

4605 MacCorkle Ave, SW

Attention: Financial Advocate

South Charleston, WV 25309

### **What is covered under Financial Assistance?**

All emergency and medical necessary care, based on approved sliding scale. Once approved, you are covered for six (6) months.

**What is not covered under Financial Assistance?** The following are not covered by this policy:

- Elective or cosmetic services
- Surgical weight loss procedures
- Sleep lab procedures
- Elective sterilizations
- Reversals of sterilizations
- Services not consider medically necessary by most insurance companies

If a patient chooses to receive non-emergency, non-medically necessary, and/or elective care at Thomas Health System, even though they know the services will not be covered under insurance or are not eligible for Financial Assistance, the patient will be responsible for payment of the estimated amount of the claim in full prior to service.

### **What if I do not qualify for Financial Assistance or cannot meet the guidelines above?**

If you do not qualify for Financial Assistance as outlined above, you will still be eligible for discounted care. If you are uninsured, you may be eligible for a self-pay discount in accordance with Thomas Health System's Self-Pay Policy.

