

Calculation of Amount Owed For Financial Assistance Eligible Individuals

The hospital limits charges for emergency and other medically necessary care provided to patients eligible for financial assistance to Amounts Generally Billed (AGB) to insured individuals. The amounts generally billed to insured individuals is determined by taking all accounts paid over a recent 12-month period, for Medicare, Medicare Advantage, contracted and non-contracted commercial insurance and calculating the average discount given. Financial responsibility is then calculated as follows:

Your Total Charges x Calculated Average Discount Percentage = Your financial responsibility.

Please contact the patient accounts department at the hospital for current information about AGB.

Per our financial assistance policy, to qualify for a 100% reduction in your financial responsibility, you must have an annual household income that does not exceed 200% of the Federal Poverty Guideline. An application and supporting documentation is required to qualify.

2016 Poverty Guidelines

Persons in family/household Poverty guideline

1	\$11,880
2	16,020
3	20,160
4	24,300
5	28,440
6	32,580
7	36,730
8	40,890

For families/households with more than 8 persons, add \$4,160 for each additional person.