

GUNDERSEN SAINT ELIZABETH'S HOSPITAL AND CLINICS

Summary of Financial Assistance Policy

Gundersen Saint Elizabeth's Hospital and Clinics (GSEHC) has a commitment to and respect for each person's dignity with a special concern for those who struggle with barriers to access healthcare services. GSEHC has an equal commitment to manage its healthcare resources as a service to the entire community. In furtherance of these principles, GSEHC provides financial assistance for certain individuals who receive emergency or other medically necessary care from GSEHC. This summary provides a brief overview of GSEHC's Financial Assistance Policy.

Who Is Eligible?

You may be able to get financial assistance. Financial assistance is generally determined by your total household income as compared to the Federal Poverty Level. If your income is less than or equal to 250% of the Federal Poverty Level, you will receive a 100% charity care write-off on the portion of the charges for which you are responsible. If your income is above 250% of the Federal Poverty Level but does not exceed 400% of the Federal Poverty Level, you may receive discounted rates on a sliding scale. Patients who are eligible for financial assistance will not be charged more for eligible care than the amounts generally billed to patients with insurance coverage.

What Services Are Covered?

The Financial Assistance Policy applies to emergency and other medically necessary care. These terms are defined in the Financial Assistance Policy. Elective services are not covered by the Financial Assistance Policy.

How Can I Apply?

To apply for financial assistance, you typically will complete a written application and provide supporting documentation, as described in the Financial Assistance Policy and the Financial Assistance Policy application.

How Can I Get Help with an Application?

For help with a Financial Assistance Policy application, you may contact *Patient Accounts Department* at 651-565-5697 or 1-800-581-4531, ext. 55697.

How Can I Get More Information?

Free copies of the Financial Assistance Policy and Financial Assistance Policy application form are available free of charge:

1. By request at the Admissions Office or the Patient Accounts Department at Saint Elizabeth's Medical Center.
2. By calling 651-565-5697 or 1-800-581-4531 ext. 55697.
3. By mail to: Gundersen Saint Elizabeth's Hospital and Clinics
Attn: Patient Accounts
1200 Grant Blvd West
Wabasha, MN 55981

What If I Am Not Eligible?

If you do not qualify for financial assistance under the Financial Assistance Policy, you may qualify for other types of assistance. For more information, please contact the Patient Accounts Department by telephone at 651-565-5697 or 1-800-581-4531 ext. 55697

Translations of the Financial Assistance Policy, the Financial Assistance Policy application, and this plain language summary are available in the following languages upon request:

Spanish