

## **Spencer Hospital Financial Assistance Information Sheet**

Spencer Hospital exists to provide healthcare services to all person in need, without regard to the consideration of race, gender, creed, national origin, or the ability to pay. As such, Spencer Hospital is committed to providing community assistance to patients and families when charges for hospital/clinic services received create an undue financial hardship.

Financial assistance will be offered to uninsured, underinsured, and insured patients without regard to residency for medically necessary visits. Financial assistance is only available after all other payment sources are reviewed and determined to have been exhausted. SH Financial Assistance program is intended to assist those in need and not intended to be used as a payment source.

If Spencer Hospital receives information within 90 days from the charity determination that indicates that the information relied on in making the determination was in error or false, the Financial Counselor, Director of Revenue Cycle, or CFO will consider the impact of the subsequent information and may, in their sole discretion, provide additional Financial Assistance and/or revoke previously granted Financial Assistance and require payment of the service that had been previously considered.

All patients without regard to race, color, sex, age, disability, creed, religion, national origin, political belief or residency are eligible for Financial Assistance.

Financial Assistance may be applied for at the time of admission, before discharge, or after discharge. Financial assistance services represent those categories of service provided to patients when full payment based on established rates is not expected or received. Patients with billings at all locations (Spencer Hospital, Avera Clinic, Milford Family Care, Sioux Rapids Family Care, and Abben Cancer center) can complete one Financial Assistance application with each location applying assistance in accordance with their specific policy.

Eligibility for Financial Assistance will remain in effect for the remainder of the fiscal year that the eligibility is determined but can be reexamined at any time new information is available. This timeframe is contingent upon the patient working in good faith with SH on all payment sources. A new application is required each new fiscal year for visits within that fiscal year. Financial assistance is not available on accounts that have already been paid in full or those accounts in bad debt.

Please complete the Financial Assistance application and provide the information requested as outlined on the Financial Assistance application. A Financial Counselor will determine if request meets eligibility criteria and a written notice will be sent to the applicant. All information will be held in the strictest confidence.

Failure to complete the forms and provide adequate supporting documentation of the information provided could disqualify the applicant from receiving Financial Assistance.

Applicants may petition the hospital in writing within 30 days for reconsideration based on extenuating circumstances.

### **Eligibility Criteria Covered Services:**

Services covered include Inpatient and Outpatient based hospital services, clinic services, and professional services that are billed by Spencer Hospital. Services must be medically necessary services. Financial Assistance does not cover elective surgical procedures or services that are not billed by SH (Anesthesiology, Surgeons professional fees, etc.).

### **Income:**

Income is based on family income. Eligibility for and the amount of benefit, if any, are determined based on a point system which evaluates the applicants income compared to the annual poverty guidelines. Because the Federal Poverty

Guidelines are updated annually, the amounts below will change as those guidelines are adjusted. The applicant's total number of points will determine their financial assistance eligibility.

<b>2024 HHS Poverty Guidelines</b>		
<b>Family Size</b>	<b>48 States &amp; DC</b>	<b>150%</b>
1	\$15,060	\$22,590
2	\$20,440	\$30,660
3	\$25,820	\$38,730
4	\$31,200	\$46,800
5	\$36,580	\$54,870
6	\$41,960	\$62,940
7	\$47,340	\$71,010
8	\$52,720	\$79,080
For families/households with more than 8 persons, add \$5,380 for each additional person.		

This policy is intended to provide guidelines for financial assistance. The hospital reserves the right to make adjustments in unique situations based on facts and extenuating circumstances.

Subsequent DHS poverty guideline updates will be used as they become effective. A schedule is included as part of this policy reflecting the current guidelines and will be replaced as the guidelines are updated.

Income, for purposes of this policy, refers to all cash receipts before taxes from all sources. It includes wages and salaries before any deductions. It includes receipts from self-employment or business or farm after business expenses excluding depreciation. It includes payments from public assistance, social security, unemployment and workers compensation, veteran's benefits, alimony, child support, military family allotments, government and private pensions, insurance and annuity payment, income from dividend, interest, rents, royalties, estates and trusts, college and university scholarships, grants, fellowships and assistantships, gambling and lottery winnings. In addition, income includes resources drawn down from bank accounts, the sale of property, tax refunds, gifts, loans, inheritance, insurance payments, and compensation for injury. The above identified sources of income are not an exhaustive list and are only provided as examples of income.

If an adult member of a household is unemployed, a copy of the person's filing with the Iowa Workforce Development Unemployment Office may be requested.

Annual income will be calculated and assessed points based on the amount the applicant's annual income exceeds 150% poverty level for that household size. The applicant's total number of points will determine their financial assistance eligibility.

**Assets:**

Assets also affect the amount of benefit that may be awarded. It is not the desire or intent of this policy to force people to sell assets or incur additional debt. However, Financial Assistance shall only be granted to those applicants truly in need. Therefore, the following asset limits apply:

Home: asset threshold equals \$60,000

Liquid and other Non-Liquid Assets: asset threshold equals \$2,500

Liquid assets are those assets that are easily converted into cash. Cash, checking and savings accounts, money market accounts, certificates of deposit (CDs), stocks, bonds, mutual funds, life insurance cash value, 401ks and Individual

Retirement accounts (IRAs) are examples of liquid assets. Non-liquid assets (real estate, long term investments, recreational vehicles, boats, etc.) will also be considered and a statement of the fair market value for such assets must be provided.

Assets will be evaluated and assigned points based on their net value. Net value is the value of the assets a person owns, minus the liabilities they owe. The applicant's total number of points will determine their financial assistance eligibility.

Income/Poverty Level (\$ Amount over 150% of Poverty)	Points	Net Asset: Home Only	Points	Net Assets: Excluding Home	Points
0-1,999	0	0-60,000	0	0-2,499	0
2,000-3,999	1	60,000-69,999	1	2,500-4,999	1
4,000-5,999	2	70,000-79,999	2	5,000-7,499	2
6,000-7,999	3	80,000-89,999	3	7,500-9,999	3
8,000-9,999	4	90,000-99,999	4	10,000-12,499	4
10,000-11,999	5	+100,000	5	12,500-14,999	5
12,000-13,999	6			15,000-17,499	6
14,000-15,999	7			17,500-19,999	7
16,000-17,999	8			20,000-22,499	8
18,000-19,999	9			22,500-24,999	9
20,000-21,999	10			25,000-27,499	10
22,000-23,999	11			27,500-29,999	11
24,000-25,999	12			30,000-32,499	12
26,000-27,999	13			32,500-34,999	13
28,000-29,999	14			35,000-37,499	14
30,000-31,999	15			37,500-39,999	15
32,000-33,999	16			40,000-42,499	16
34,000-35,999	17			42,500-44,999	17
36,000-37,999	18			45,000-47,499	18
38,000-39,999	19			47,500-49,999	19
40,000-41,999	20			50,000-52,499	20
+42,000	21			52,500 and over	21

**Eligibility Determination:**

Applicants will be scored based on income, net home value, and net assets, and points will be assigned accordingly. Once points have been determined, the applicant's overall eligibility will be determined based on the chart below. The total number of points and the total amount owed on eligible accounts will determine the amount of the financial assistance discount awarded to the applicant.

TOTAL BALANCES OWED	TOTAL POINTS	0-1	2-3	4-5	6-7	8-9	10-11	12-13	14-15	16-17	18-19	20-21
Up to \$7,500	AMOUNT OF DISCOUNT	100%	90%	80%	70%	60%	50%	40%	30%	20%	10%	5%
\$7,501 to \$10,000		100%	90%	90%	80%	70%	60%	50%	40%	30%	20%	10%
Over \$10,000		100%	100%	95%	85%	75%	65%	55%	45%	35%	25%	15%