### **Eligibility Considerations** continued

- Employment status and future earning capacity.
- After other financial resources listed above have been exhausted or ruled out, eligibility for financial assistance will be based on the household's gross monthly income, or potential income. The amount of assistance will be determined utilizing the criteria as established by the Alaska Federal Poverty Income Guideline Sliding Scale.
- Outstanding medical bills owed by the household will be considered when the total outstanding medical bills exceed 30% of the household's gross annual income.

## **Eligibility Determinations**

Determinations of eligible for Financial Assistance are generally made within 30 days of receipt of the application. A written notification form is provided to each applicant advising him or her of the decision. Patients that have been determined eligible for Financial Assistance will not be responsible for more than the amounts generally allowed by Medicare and Commercial Insurance payers.

#### Full Financial Assistance - 100% Discount

A patient whose household income is equal to or less than 200% of the most recent Alaska Federal Poverty Guidelines qualifies for a Full Financial Assistance discount.

#### Partial Financial Assistance - 50%-70% Discount

A patient whose household income is greater than 200% and less than 300% of the most recent Alaska Federal Poverty Guidelines may qualify for a Partial Financial Assistance based on the sliding scale discount. The discount may range from 50 to 70% of the private pay balance.



CPH is a Planetree designated hospital. For more information, go to www.planetree.org.

### Coverage

Approved Financial Applications are valid for 3 months from the date of determination. Services rendered after 3 months from the date of approval, will require additional documentation to support the need of continued financial assistance.

Cosmetic and other services that are not medically necessary are not eligible for Financial Assistance. A patient may qualify and be approved for Financial Assistance, but a service may be determined to not meet the medical necessity criteria for Financial Assistance.

The Financial Assistance Program at Central Peninsula Hospital covers multiple providers.

The following is a list of providers that deliver services at Central Peninsula Hospital and **that honor** the FAP determination:

- Central Peninsula Hospital
- Central Peninsula Hospital Physician Group (including Emergency Room Physicians, Anesthesia Providers and Physicians performing EKG interpretations at CPH)
- Central Peninsula Hospital owned Physician Clinics
- Skagit Radiology/North Star Medical Imaging
- The Alaska Hospitalist Group

Patient should supply the CPH Financial Assistance determination letter to providers outside the CPH system to receive the Financial Assistance discount.

The following is a list of providers that deliver services at Central Peninsula Hospital and **that do not honor** the FAP determination:

- Peninsula Pathology Institute
- All other Non-CPH Employed physicians not described above do not routinely accept the Financial Assistance program determinations.

#### **CENTRAL PENINSULA HOSPITAL**

# Financial Assistance Program





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# FINANCIAL ASSISTANCE PROGRAM

## **Purpose**

With our core values of respect and compassion for all people, we provide care for persons who are in need. We give special consideration to those who are unable to pay, and those with limited financial means that make it extremely difficult to meet the expenses incurred by receiving health care. The purpose of this program is to establish guidelines for Financial Assistance for patients who incur significant financial burden as a result of the amount they are expected to owe for medically necessary health care services.

#### **Definition of Financial Assistance**

Financial Assistance is provided to a patient with a demonstrated inability to pay. A patient is eligible for Financial Assistance consideration based upon the household meeting certain income eligibility after other resources have been exhausted. Consideration may also be given for households that are determined to be medically indigent, meaning their total medical bills exceed 30% of their

annual gross income. Individuals who qualify for Financial Assistance receive a percentage discount off of the remaining balance owed, or are not expected to make payment for the health care services provided. Financial Assistance is not only available for those without insurance, it may also include unpaid coinsurance, co-payments, and deductibles for insured patients who meet the Financial Assistance eligibility criteria.

# **Timeline For Applying**

Accounts still in the active collection process that have not been turned to Bad Debt status, are always eligible for Financial Assistance application and consideration.

If the account is in a Bad Debt status, applications for Financial Assistance can be submitted up to 240 days after the date of the first billing. After 240 days, the account is no longer eligible for Financial Assistance.

### **How To Apply**

An application must be received in order to be considered for Financial Assistance. Patients will obtain a copy of the Financial Assistance application and complete it along with the required documentation attachments to the best of their ability. Financial assistance applications may be submitted by the patient, outside healthcare providers,

community or religious groups, social services, family members and CPH staff.

The Financial Assistance Program application is available at multiple locations within the hospital including the Cashier, Financial Counselor, Admissions/Registration areas and Emergency Room. It is also available for download and printing online at <a href="https://www.cpgh.org/patientfinancialservices">www.cpgh.org/patientfinancialservices</a>.

The first page of the application describes the documentation that should be submitted along with the application.

The following staff is available to answer questions or to provide assistance in completing the application:

# **Central Peninsula Hospital Financial Counselors**

#### Patient Last Name starts with A through L

Your personal Financial Counselor is here to help at .....(907) 714-4401

#### Patient Last Name starts with M through Z

Your personal Financial Counselor is here to help at .....(907) 714-4400

### Central Peninsula Hospital's Physician Clinic's

Self Pay Biller at ......907-714-4066

Completed applications may be submitted as follows:

- Turned into the Cashier or Financial Counselor offices in the main CPH Hospital location
- Faxed to the Cashier office at 907-714-4637
- Faxed to the Central Billing Office at 907-262-5191
- Mailed to:

#### **Financial Counselor**

Central Peninsula Hospital 250 Hospital Place Soldotna, AK 99669

#### **Eligibility Considerations**

- Financial assistance is generally secondary to all other financial resources available to the patient including insurance, government programs, third party liability, and personal assets.
- Credit report with open lines of credit indicative of resources to pay the patient's bill may be reason for denial.
- Family size. (number of individuals living in household)

Continued