

## Patient Financial Assistance Policy Plain Language Summary

As part of Pottstown Hospital's mission to provide compassionate, accessible, high-quality, costeffective healthcare to the community, we recognize some patients and families may need financial assistance to help with the cost of health care services. Therefore, Pottstown Hospital offers patient financial assistance to ensure access to high-quality health care for all.

## **Eligibility and Assistance Offered**

Patients who are denied Medicaid coverage, or who are screened and do not meet the Medicaid guidelines, will be considered for the Pottstown Hospital Patient Financial Assistance program. Patients and families wishing to apply for assistance may submit an application and the supporting documentation to a Pottstown Hospital patient financial services representative.

The Federal Poverty Guidelines are updated yearly and are used to determine eligibility for Patient Financial Assistance. Patients will be asked to provide verification of household income along with the names of people living in the household during the application process. This information is used to identify where the household falls within the Federal Poverty Level Guidelines (FPL). The FPL category will determine the amount a patient will pay toward a medical bill. For patients above 400% of the FPL, the uninsured rate applies. The uninsured rate is 25% of the amounts generally billed and is applied when an initial payment is made. Patients eligible for financial assistance will not be charged more than the amounts generally billed for emergency or other medically necessary care.

## **Applying for Patient Financial Assistance**

Please visit our website at: <a href="https://towerhealth.org/locations/pottstown-hospital/billing/financial-assistance">https://towerhealth.org/locations/pottstown-hospital/billing/financial-assistance</a> to access our Financial Assistance Policy and applications. Documents are translated in several languages and are available on the website. In addition, printed copies of the entire Patient Financial Assistance Policy and application may be obtained at no cost by emailing us at <a href="mailto:center@towerhealth.org">center@towerhealth.org</a> or calling 484-628-5683.

Patients are encouraged to begin applying for financial assistance as early as possible. The sooner Pottstown Hospital becomes aware of the financial need, the greater the opportunity for us to connect you with potential resources such as Medicaid and other assistance or insurance programs. Patients may request consideration for financial assistance at any point during the billing and collection cycle.

Should you need help with applying, a Pottstown Hospital patient financial services representative will guide you through the application process. Please visit our Financial Counselor's office located at:

Pottstown Hospital 1600 E High St. Pottstown, PA 19464

You may also contact us by email at call.center@towerhealth.org or call 484-628-5683.