Financial Assistance Policy Plain Language Summary

Charleston Area Medical Center, Inc. ("CAMC") is committed to providing quality health care to those in need regardless of their ability to pay. This letter explains our financial assistance policy which exists to provide eligible patients, partially or fully discounted emergency or other medically necessary healthcare services provided by the CAMC. CAMC and any substantially related entity are hereinafter referred to as CAMC. Patients seeking Financial Assistance must apply for the program which is summarized herein.

Charleston Area Medical Center, Inc.'s Financial Assistance Policy

Eligible Services – Emergency or other medically necessary health care services provided by CAMC and billed by CAMC. The Financial Assistance Policy (FAP) only applies to services billed by CAMC. Other services which are separately billed by other providers, such as physicians or laboratories, are not eligible under the FAP.

Eligible Patients – Patients receiving eligible services, who submit a complete Financial Assistance Application, and who are determined eligible for Financial Assistance by CAMC.

Determination of Financial Assistance Eligibility: Reduced or no payment will be expected for patients who meet the criteria for financial assistance. The main requirements for financial assistance are as follows:

- Income must be at 300% or less of the Federal Poverty Income Guidelines (FPL)
- AND, total asset guidelines (\$50,000 or less), excluding primary car and primary residence
- Patients that fall under 200% of FPL will get 100% off balance due
- Patients that fall in 201%-300% of FPL will get 52% off balance due

Patients may apply for financial assistance at any time – before, during or after care.

If you apply for financial assistance, you must provide us with all information required. You are responsible for applying for financial assistance.

Following a determination of financial assistance eligibility, CAMC will not charge patients who are eligible for Financial Assistance more for emergency and other medically necessary health care services than the amounts generally billed.



How do I apply for Financial Assistance?

Step 1: Request a Financial Assistance Application.

Forms are available:

- On our website at camc.org
- 501 Morris St., Charleston, WV 25301
- At each registration area
- By calling the Financial Assistance Unit at (304) 388-6496 or (304) 388-6406

Step 2: Complete and return the Financial Assistance Application.

Complete the form and attach the documentation that may be required:

- If enrolled in a state sponsored program
 - o Complete the application to where it says family income
 - o List income under wages
 - o Attach verification of enrollment in a state program such as WIC, SNAP, etc.
 - o *Sign the application*
 - o Return application by mail to the address on the application or by fax at (304) 388-3596.
- If not enrolled in a state sponsored program.
 - o Fill out all lines of the application, put N/A if something does not apply
 - o Attach the following required documentation:
 - Most recent bank statement (last 30 days) in detail
 - Last 30 days of payroll stubs for all members of household (Self-employed individuals should submit their most recent tax return).
 - If no income and/or food and shelter is provided by someone other than the applicant.
 A notarized form must be signed. This form can be found on our website at *camc.org*.
 - o *Sign the application*
 - o Return application by mail to the address on the application or by fax at (304) 388-3596.
- Patients needing assistance with the application process should contact the Financial Assistance Unit at (304) 388-6496 or (304) 388-6406 or the registration area of each hospital (CAMC Memorial Hospital, 3200 Maccorkle Ave. SE, Charleston, WV 25304; CAMC General Hospital, 501 Morris St., Charleston, WV 25301; CAMC Women and Children's Hospital, 800 Pennsylvania Ave., Charleston, WV 25302; CAMC Teays Valley Hospital, 1400 Hospital Drive, Hurricane, WV 25526 CAMC Greenbrier Valley Medical Center 1320 Maplewood Ave., Ronceverte, WV 24970 (304) 647-4411 ext. 2010).

Step 3: We will review your application.

We will review your application to determine if you qualify for assistance according to the Financial Assistance Policy guidelines.

Step 4: You will receive a decision.

You will receive a written decision. If you are denied, it is important that you contact CAMC to set up payment arrangements.

