

Revised: November 28, 2017

REGIONAL WEST GARDEN COUNTY- FINANCIAL ASSISTANCE POLICY PLAIN LANGUAGE SUMMARY

Regional West Garden County Financial Assistance Policy/Program (FAP) exists to provide eligible patients, partially or fully discounted emergency or other medically necessary healthcare services provided by Regional West Garden County hereinafter referred to as "RWGC". Patients seeking Financial Assistance must apply for the program, which is summarized herein.

Eligible Services- Emergency or other medically necessary healthcare services provided by RWGC and billed by RWGC. The FAP only applies to services billed by RWGC. Other services, which are separately billed by other providers, such as affiliated or non-affiliated physicians or independent laboratories, are not eligible under the FAP. For more information on providers who are and are not subject to the FAP see the FAP or, for a list of providers who are or are not subject to the FAP, contact the RWGC Financial Services Department at 308-772-3283, email FAST@rwgs.org, or visit <http://gchealth.org/about-your-bill/>.

Eligible Patients- Patients receiving eligible services, who submit a complete a Financial Assistance Application {including related documentation/information), and who satisfy the current income guidelines set forth in the FAP are eligible for Financial Assistance by RWGC. Eligible Persons are eligible for Financial Assistance, when their Family Income is at or below 300% of the Federal Government's Federal Poverty Levels (FPL). **Eligibility for Financial Assistance means that Eligible Persons will have their care covered fully or partially, and they will not be billed more than "Amounts Generally Billed" (AGB) to insured persons.**

Financial Assistance levels, based solely on Family Income and FPL, are:

- Family Income at 0 to 300% of FPL Full Financial Assistance; \$0 is billable to the patient.
- Family Income greater than 300% of FPL Partial Financial Assistance; AGB is maximum billable to the patient

Note: Other criteria beyond FPL are also considered (i.e., availability of cash or other assets that may be converted to cash, and excess monthly net income relative to monthly household expenditures), which may result in exceptions to the preceding. If no Family Income is reported, information will be required as to how daily needs are met.

How to Apply- The FAP and the related Application Form may be obtained/completed/submitted as follows:

- At RWGC's main Registration desk or Emergency Room desk.
- Request documents be mailed to you, by calling RWGC's Financial Services Department at 308-772-3283
- Request documents by mail/or visiting in person at: RWGC Financial Services Department, Regional West Garden County, 1100 West 2nd Street, Oshkosh, Nebraska 69154; In-person, 1100 West 2nd Street, Oshkosh, Nebraska.
- Download the documents from RWGC's website: <http://gchealth.org/about-your-bill/>.

- Email us directly at FAST@rwhs.org.
- Mail completed applications (with all documentation/information specified in the application instructions) to: RWGC's Patient Financial Services Department, or deliver in person to Regional West Garden County, 1100 West 2nd Street, Oshkosh, Nebraska 69154.

RWGC reviews submitted applications which are complete, and determines Financial Assistance Eligibility in accordance with RWGC's Financial Assistance Policy. Incomplete applications are not considered, but applicants are notified and given an opportunity to furnish the missing documentation/information.

For help, assistance or questions related to filling out the FAP Application please visit or call: RWGC's Patient Financial Services Department, Regional West Garden County, 1100 West 2nd Street, Oshkosh, Nebraska 69154, (308)772-3283; In person, Regional West Garden County, 1100 West 2nd Street, Oshkosh, Nebraska, Monday through Friday from 8:00 AM to 4:30 PM.