Ascension St. Vincent

FINANCIAL ASSISTANCE POLICY 10/01/2024

POLICY/PRINCIPLES

It is the policy of the organizations listed below this paragraph (each one being the "Organization") to ensure a socially just practice for providing emergency and other medically necessary care at the Organization's facilities. This policy is specifically designed to address the financial assistance eligibility for patients who are in need of financial assistance and receive care from the Organization. This policy applies to each of the following Organizations within Ascension St. Vincent:

Carmel Ambulatory Surgery Center, LLC

- 1. All financial assistance will reflect our commitment to and reverence for individual human dignity and the common good, our special concern for and solidarity with persons living in poverty and other vulnerable persons, and our commitment to distributive justice and stewardship.
- 2. This policy applies to all emergency and other medically necessary care provided by the Organization, including employed physician services and behavioral health. This policy does not apply to charges for care that is not emergency and other medically necessary care.
- 3. The List of Providers Covered by the Financial Assistance Policy provides a list of any providers delivering care within the Organization's facilities that specifies which are covered by the financial assistance policy and which are not.

DEFINITIONS

For the purposes of this Policy, the following definitions apply:

- "501(r)" means Section 501(r) of the Internal Revenue Code and the regulations promulgated thereunder.
- "Amount Generally Billed" or "AGB" means, with respect to emergency and other medically necessary care, the amount generally billed to individuals who have insurance covering such care.
- "Community" means Carmel Ambulatory Surgery Center, LLC's primary service area, although not exclusive to, is Hamilton County which is in Central Indiana. A Patient will also be deemed to be a member of the Organization's Community if the emergency and medically necessary care the Patient requires is continuity of emergency and medically necessary care received at another Ascension Health facility where the Patient has qualified for financial assistance for such emergency and medically necessary care.
- "Emergency care" means care to treat a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention may result in serious impairment to bodily function, serious dysfunction of any bodily organ or part, or placing the health of the individual in serious jeopardy.
- "Medically necessary care" means care that is (1) appropriate and consistent with and essential for the prevention, diagnosis, or treatment of a Patient's condition; (2) the most appropriate supply or level of service for the Patient's condition that can be provided safely; (3) not provided primarily

for the convenience of the Patient, the Patient's family, physician or caretaker; and (4) more likely to result in a benefit to the Patient rather than harm. For future scheduled care to be "medically necessary care," the care and the timing of care must be approved by the Organization's Chief Medical Officer (or designee). The determination of medically necessary care must be made by a licensed provider that is providing medical care to the Patient and, at the Organization's discretion, by the admitting physician, referring physician, and/or Chief Medical Officer or other reviewing physician (depending on the type of care being recommended). In the event that care requested by a Patient covered by this policy is determined not to be medically necessary by a reviewing physician, that determination also must be confirmed by the admitting or referring physician.

- "Organization" means Carmel Ambulatory Surgery Center, LLC.
- "**Patient**" means those persons who receive emergency and other medically necessary care at the Organization and the person who is financially responsible for the care of the patient.

Financial Assistance Provided

Financial assistance described in this section is limited to Patients that live in the Community:

- 1. Subject to the other provisions of this Financial Assistance Policy, Patients with income less than or equal to 250% of the Federal Poverty Level income ("FPL"), will be eligible for 100% charity care on that portion of the charges for services for which the Patient is responsible following payment by an insurer, if any, if such Patient determined to be eligible pursuant to presumptive scoring (described in Paragraph 5 below) or submits a financial assistance application (an "Application") on or prior to the 240th day after the Patient's first discharge bill and the Application is approved by the Organization. Patient will be eligible for up to 100% financial assistance if Patient submits the Application after the 240th day after the Patient's first discharge bill, but then the amount of financial assistance available to a Patient in this category is limited to Patient's unpaid balance after taking into account any payments made on Patient's account. A Patient eligible for this category of financial assistance will not be charged more than the calculated AGB charges.
- 2. Subject to the other provisions of this Financial Assistance Policy, Patients with incomes above 250% of the FPL but not exceeding 400% of the FPL, will receive a sliding scale discount on that portion of the charges for services provided for which the Patient is responsible following payment by an insurer, if any, if such Patient submits an Application on or prior to the 240th day after the Patient's first discharge bill and the Application is approved by the Organization. Patient will be eligible for the sliding scale discount financial assistance if Patient submits the Application after the 240th day after the Patient's first discharge bill, but then the amount of financial assistance available to a Patient in this category is limited to Patient's unpaid balance after taking into account any payments made on Patient's account. A Patient eligible for this category of financial assistance will not be charged more than the calculated AGB charges. The sliding scale discount is as follows:

Patients between 251% FPL and 300% FPL will receive 90% assistance Patients between 301% FPL and 350% FPL will receive 80% assistance Patients between 351% FPL and 400% FPL will receive 75% assistance

- 3. Subject to the other provisions of this Financial Assistance Policy, a Patient with income greater than 400% of the FPL may be eligible for financial assistance under a "Means Test" for some discount of Patient's charges for services from the Organization based on a Patient's total medical debt. A Patient will be eligible for financial assistance pursuant to the Means Test if the Patient has excessive total medical debt, which includes medical debt to Ascension and any other health care provider, for emergency and other medically necessary care, that is equal to or greater than such Patient's household's gross income. The level of financial assistance provided pursuant to the Means Test is the same as is granted to a patient with income at 400% of the FPL under Paragraph 2 above, if such Patient submits an Application on or prior to the 240th day after the Patient's first discharge bill and the Application is approved by the Organization. Patient will be eligible for the means test discount financial assistance if such Patient submits the Application after the 240th day after the Patient's first discharge bill, but then the amount of financial assistance available to a Patient in this category is limited to Patient's unpaid balance after taking into account any payments made on Patient's account. A Patient eligible for this category of financial assistance will not be charged more than the calculated AGB charges.
- 4. A Patient may not be eligible for the financial assistance described in Paragraphs 1 through 3 above if such Patient is deemed to have sufficient assets to pay pursuant to an "Asset Test." The Asset Test involves a substantive assessment of a Patient's ability to pay based on the categories of assets measured in the FAP Application. A Patient with such assets that exceed that exceed 250% of such Patient's FPL amount may not be eligible for financial assistance.
- 5. Eligibility for financial assistance may be determined at any point in the revenue cycle and may include the use of presumptive scoring for a Patient with a sufficient unpaid balance within the first 240 days after the Patient's first discharge bill to determine eligibility for 100% charity care notwithstanding Patient's failure to complete a financial assistance application ("FAP Application"). If Patient is granted 100% charity care without submitting a completed FAP Application and via presumptive scoring only, the amount of financial assistance for which Patient is eligible is limited to Patient's unpaid balance after taking into account any payments made on Patient's account. A determination of eligibility based on presumptive scoring only applies to the episode of care for which the presumptive scoring is conducted.
- 6. For a Patient that participates in certain insurance plans that deem the Organization to be "outof-network," the Organization may reduce or deny the financial assistance that would otherwise be available to Patient based upon a review of Patient's insurance information and other pertinent facts and circumstances.
- 7. The Patient may appeal any denial of eligibility for Financial Assistance by providing additional information to the Organization within fourteen (14) calendar days of receipt of notification of denial. All appeals will be reviewed by the Organization for a final determination. If the final determination affirms the previous denial of Financial Assistance, written notification will be sent to Patient. The process for Patients and families to appeal the Organization's decisions regarding eligibility for financial assistance is as follows:
 - a. All appeals will need to be submitted in writing via mail to: Ascension St. Vincent, Vice President of Revenue Cycle, 5763 Reliable Parkway, Chicago, IL 60680-5763.

b. All appeals will be considered by the Organization's financial assistance appeals committee, and decisions of the committee will be sent in writing to the Patient or family that filed the appeal.

Other Assistance for Patients Not Eligible for Financial Assistance

Patients who are not eligible for financial assistance, as described above, still may qualify for other types of assistance offered by the Organization. In the interest of completeness, these other types of assistance are listed here, although they are not need-based and are not intended to be subject to 501(r) but are included here for the convenience of the community served by the Organization.

- 1. Uninsured Patients who are not eligible for financial assistance will be provided a discount based on the discount provided to the highest-paying payor for that Organization. The highest paying payor must account for at least 3% of the Organization's population as measured by volume or gross patient revenues. If a single payor does not account for this minimum level of volume, more than one payor contract should be averaged such that the payment terms that are used for averaging account for at least 3% of the volume of the Organization's business for that given year.
- 2. Uninsured and insured Patients who are not eligible for financial assistance may receive a prompt pay discount. The prompt pay discount may be offered in addition to the uninsured discount described in the immediately preceding paragraph.

Limitations on Charges for Patients Eligible for Financial Assistance

Patients eligible for Financial Assistance will not be charged individually more than AGB for emergency and other medically necessary care and not more than gross charges for all other medical care. The Organization calculates one or more AGB percentages using the "look-back" method and including Medicare fee-for-service and all private health insurers that pay claims to the Organization, all in accordance with 501(r). A free copy of the AGB calculation description and percentage(s) may be obtained on the Organization's website or by visiting any Patient Registration department or by calling our Customer Service Department.

Applying for Financial Assistance and Other Assistance

A Patient may qualify for financial assistance through presumptive scoring eligibility or by applying for financial assistance by submitting a completed FAP Application. The FAP Application and FAP Application Instructions are available on the Organization's website or by visiting any Patient Registration department or via mail by calling our Customer Service Department. The Organization will require the uninsured to work with a financial counselor to apply for Medicaid or other public assistance programs for which the patient is deemed to be potentially eligible in order to qualify for financial assistance (except where eligible and approved via presumptive scoring). A Patient may be denied financial assistance if the Patient provides false information on a FAP Application or in connection with the presumptive scoring eligibility process, if the patient refuses to assign insurance proceeds or the right to be paid directly by an insurance company that may be obligated to pay for the care provided, or if the patient refuses to work with a financial counselor to apply for Medicaid or other public assistance programs for which the patient is deemed to be potentially eligible in order to qualify for financial to be paid directly by an insurance company that may be obligated to pay for the care provided, or if the patient refuses to work with a financial counselor to apply for Medicaid or other public assistance programs for which the patient is deemed to be potentially eligible in order to qualify for financial

assistance (except where eligible and approved via presumptive scoring). The Organization may consider a FAP Application completed less than six months prior to any eligibility determination date in making a determination about eligibility for a current episode of care. The Organization will not consider a FAP Application completed more than six months prior to any eligibility determination date.

Billing and Collections

The actions that the Organization may take in the event of nonpayment are described in a separate billing and collections policy. A free copy of the billing and collections policy may be obtained on the Organization's website or by visiting any Patient Registration department or via mail by calling our Customer Service Department.

Interpretation

This policy, together with all applicable procedures, is intended to comply with and shall be interpreted and applied in accordance with 501(r) except where specifically indicated.

Carmel Ambulatory Surgery Center, LLC

LIST OF PROVIDERS COVERED BY THE FINANCIAL ASSISTANCE POLICY 10/01/2024

The list below specifies which providers of emergency and other medically necessary care delivered in the hospital facility are covered by the Financial Assistance Policy (FAP). *Please note that any care that is not emergency and other medically necessary care is not covered by the FAP for any providers.*

Providers covered by FAP	Providers not covered by FAP
All St. Vincent Medical Group Physicians	John Abrams MD
All St. Vincent Employed Physicians	Leslie Abrams Tobe MD
Brendan Frank MD	Noah Agada MD
Christine Kelley MD	Abhimanyu Aggarwal MD
	Vaibhav Agrawal MD
	Jeffrey Agricola DPM
	Naheed Ahmad DMD
	John Aker MD
	Sajlv Alex MD
	Mona Alqulali MD
	Sewit Amde MD
	Caryn Anderson MD
	Stanton Angermeier MD
	Erica Anspach Will MD
	John Arbuckle MD
	Pedro Arrabal MD
	Edward Aull MD
	Rickinder Bains DO
	Robert Baltera MD
	Robert Batler MD
	Kevin Beadle DDS
	Jay Beagle DDS
	Teresa Beam MD
	Vinayak Belamkar MD
	Bridgit Bell MD
	Cynthia Benedict MD
	Barry Berch MD
	Debra Bergman MD
	Stephanie Bergstein MD
	Carlos Berrios MD
	Feriyl Bhaijee MD

Dishand Discoust off MD
Richard Biggerstaff MD
 Ruemu Birhiray MD
Christina Boccone MD
 Kristine Bolin MD
 Sally Booth MD
 Bradford Bopp MD
Amanda Born MD
John Bozic DDS
Kathleen Bradley DDS
Adam Brazus MD
Margaret Brengle MD
Paul Broderick DO
Beth Brogan MD
 Seth Bruggers MD
Mary Brunner MD
Rodney Bucher MD
Jason Buckner MD
Tovah Buikema DO
Samuel Bullard DDS
Katherine Bumgardner DDS
Jennifer Bush MD
Brenda Cacucci MD
Nathalie Castillo MD
Mario Cedillo MD
Rachel Chhiba DPM
Euna Choi MD
Tae Kae Chong MD
James Christenson MD
Hannah Christopher DO
Craig Cieciura MD
Andrea Cifaldi DPM
Douglas Cifuentes DO
Anne Clark MD
Brian Clarke MD
Ann Collins MD
Robert Colver MD
Eugene Cone MD
Kathryn Copeland MD
Clare Cormier DPM
James Cox MD

	Michael Crovello MD
	James Cumming DO
	Kara Czarkowski DDS
	Ann Daniel MD
	Robert Darragh MD
	Robert Daze DO
	Casey Delcoco MD
	Deborah Del Rosario MD
	Dale Dellacqua MD
	George Desilvester MD
	Komal Dhiran MD
	David Diaz MD
	Timothy Dicke MD
	Brian Dierckman MD
	Gregory Dikos MD
	Angeline Diokno-Morris MD
	John Dinsmore MD
	Danh Do MD
	Scott Dolejs MD
	Sangeeth Dubbireddi MD
	Don Dubois MD
	James Dugan MD
	Elaine Dupler MD
	Natalie Eden DDS
	Michelle Edwards DDS
	Patrick Egan MD
	Adrienne Einhorn MD
	Swapna Eisinger MD
	Maria Ermitano MD
	Danielle Erney MD
	Christopher Evanson MD
	John Faircloth DO
	Lawrence Falender DDS
	Joseph Fata MD
	William Fecht MD
	Clifford Fetters MD
	William Finkelmeier MD
	Adam Fisch MD
<u> </u>	Denise Flanagan DDS
<u> </u>	Olivia Fondoble MD

Mary Farkin MD
Mary Forkin MD
Richard Foster MD
 Douglas Franke MD
 Shelagh Fraser MD
 Paul Frederick MD
 Arthur Galstian MD
Steven Gannon MD
Jonathan Gentile MD
Matthew Gentry MD
Kristi George MD
Aaron Gerstein MD
Anna Georgina Gilley MD
Mahendra Govani MD
Stephen Greenfield MD
Aparajita Gupta DDS
Sukhvinder Guram DMD
Robert Habig MD
Scott Hackett MD
Fyeza Haider MD
Taylor Hahn MD
Fyeza Haider MD
Richard Hallett MD
Mark Hamilton MD
Flora Hammond MD
Carl Hanke MD
James Hardacker MD
Samuel Harmon MD
Roy Harper MD
Montgomery Harrison DO
Steven Haug DDS
Chad Hazelrigg DDS
Austin Henderson MD
Virginia Hemelt MD
Michael Henry MD
Sarah Hill MD
Catherine Hilliker
Scott Himelstein MD
Julie Hirsch MD
John Hockema DDS
Mark Holbreich MD

Havden Helbrook MD
Hayden Holbrook MD
Michael Hopen MD
Emily Hrisomalos MD
 Melissa Huebner MD
 Lanie Huffman DPM
 Brandy Hughes MD
 Tod Huntley MD
 Bridget Hurry MD
Eric Inman MD
Karen Israel MD
Kiran Ivaturi MD
Susan Jacob MD
 Marianne Jacobs DO
Arun Jain MD
Lauren James MD
Brian Jellison MD
Christopher Jones MD
Laura Juntgen DMD
Martin Kaefer MD
David Kaehr MD
Marc Kappelman MD
Kosmas Kayes MD
Christine Kelley MD
Jennie Kho-Duffin MD
Christina Kim MD
Kristin Kindred DPM
Katherine Kobza MD
Stephen Kollias MD
Edward Kowlowitz MD
Diana Kozlowski DDS
Kathryn Krause DMD
Edward Krowiak MD
Kenneth Krueger DPM
Jennifer Kugar DDS
Christine Kuhn MD
Dhananjay Kulkarni MD
Peter Kunz MD
Benjamin Kuzma MD
Kent Lancaster MD
Meredith Langhorst MD
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Earl Lanter MD
 Carlo Lazzaro MD
Albert Lee MD
 Bradford Legge DPM
 Jeffrie Leibovitz DPM
 Timothy Lein MD
 Kimberly Lentz MD
 Larry Lett MD
 Raymond Loffer MD
 Andrew Louden MD
Aaron Ludwig MD
Chris Magee MD
James Malenkos MD
Leah Martinson MD
Ingrid Mason MD
Patrick Matoole MD
Raj Maturi MD
Jill Mazurek MD
lan McAlister MD
Michael McCarthy MD
Mary Mcateer MD
Clement Mcdonald MD
Grant Mcdougal MD
Melissa Mchenry DDS
Jaime Mckeever MD
Rachel Meeks DO
Alex Meyers MD
Anthony Miller DPM
Norman Mindrebo MD
James Miner
Amy Moon MD
David Montes DDS
David Morgan DDS
Jack Moss MD
Brian Mulherin MD
Marwan Mustaklem MD
Martina Mutone MD
Charles Nakar MD
David Nathan MD
Kenneth Ney MD

Katherine Nichols DDS
 Christopher Obeime MD
Amy Oberhelman MD
Wojciech Ornowski MD
Bradley Orris MD
 Vincent Ostrowski MD
 Michael Pannunzio MD
 David Patterson MD
Akash Patel MD
 Donnis Patton MD
Brandon Petrone DO
James Phelps MD
Erin Phillips DDS
James Pike DO
Christopher Pomeroy MD
Steven Porto DO
Gregory Poulter MD
Frederick Prall MD
Mederith Provost MD
Ismail Qattash MD
Kofi Quist MD
Rachael Raffle MD
Angeli Rampersad MD
John Ramsey MD
Pavan Rao MD
Sameena Rao MD
Adrienne Rasbach MD
David Ratzman MD
Arthur Rettig MD
Gregory Reveal MD
Keith Ridel MD
Maysa Ridha MD
Stephanie Riggen MD
Carolyn Robinson MD
Troy Roberson MD
Gavin Roberts MD
Douglas Robertson MD
Ashley Robey MD
Carolyn Robinson MD
Kelley Robrock MD

Devere Devereff MD
Bruce Rougraff MD
 Joseph Rumer MD
 Alan Sadove MD
 Maram Said DO
 Peter Sallay MD
 Daniel Salvas MD
Andrew Sampson MD
Brian Sanders DDS
Jenna Sandhu MD
Rick Sasso MD
Jennifer Satterfield-Siegel DDS
Andrew Satz MD
David Scheidler MD
Donald Schilson MD
Jonathan Schmidt MD
John Schlueter MD
Wendy Schulte MD
Alan Schwartz MD
Glen Schwenk MD
Cynthia Seffernick MD
Cody Shafer MD
Jonathan Shook MD
Vera Shreder MD
Jerome Silver MD
Barbara Siwy MD
Jerry Smartt MD
Jonathan Smerek MD
William Sobat MD
Jeffery Soldatis MD
Leo Solito MD
Nicole Sonn MD
Jeremy Spaulding DPM
Karl Stein MD
Kira Stockton DDS
Randall Stoesz MD
Timothy Story MD
Daniel Stout MD
Donald Strobel MD
Kenneth Stumpf DPM
Ronald Suh MD
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	David Sullivan DPM
	James Sumners MD
	Jessica Swenberg MD
	Alexander Tatem MD
	Matthew Tellman MD
	James Teter MD
	Aiden Thompson MD
	Jeremy Thurgood MD
	Jason Tomsic DO
	Joseph Tortorich DO
	Nakul Valsangkar MD
	Bruce Van Natta MD
	Jyothi Varanasi MD
	Ashwin Vasudevamurthy MD
	Jeffery Vaught MD
	Ana Vazquez DMD
	Steven Veatch MD
	Alejandro Vega MD
	George Vestermark MD
	Jose Vitto MD
	Jennifer Vivio MD
	Helen Wang MD
	Brittany Ward MD
	James Warr MD
	Aaron Warnock DPM
	Catherine Watts MD
	Michael Welsh MD
	Hiram Whitaker MD
	Christopher Wickman MD
	Elizabeth Wickstrom MD
	Matthew Will MD
	Ted Winkler MD
	Catherine Winslow MD
	Christopher Winters DPM
	Matthew Wong MD
	Mark Wyant MD
	Shira Yahalom MD
	Anil Yakhmi MD
	Abideen Yekinni MD
	Jessica Yen MD
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Juan Yepes DDS
Mohamad Yousef MD
Edward Zdobylak MD
Rao Zhou MD
Steven Zirkelbach MD
Charles Zollman MD
Marcin Zuberek MD