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:

St. Mary's Health, Inc. d/b/a Ascension St. Vincent Evansville Orthopedic Hospital

- 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 Ascension St. Vincent Evansville Orthopedic Hospital's primary service area, although not exclusive to, is Vanderburgh County which is in southern 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 St. Mary's Health, Inc. d/b/a Ascension St. Vincent Evansville Orthopedic Hospital.
- "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 "out-of-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 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.

Ascension St. Vincent Evansville Orthopedic Hospital

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. Mary's Medical Group Physicians	Joshua Aaron MD
All St. Vincent Employed Physicians	Herbert Adams MD
Team Health, LLC.	Bruce Adye MD
CEP America d/b/a Vituity	Peter Airel MD
Santiago Arruffat MD	Maria Aljabi MD
	Mohammed Allaw MD
	Paul Alley MD
	Terence Alvey DPM
	Patrick Amartey
	Frank Amodio MD
	Chase Andreason DMD
	John Ansbro MD
	William Ante MD
	Roy Arnold MD
	Anjum Ashraf MD
	Leyte Asuncion MD
	Donald Bailey MD
	Nihal Bakeer MD
	Sridhar Banuru MD
	Michael Barrus MD
	Hamid Bashir MD
	Cindy Basinski MD
	Bradley Bath DDS
	John Beman MD
	Martin Bender MD
	Sridhar Bhaskara MD
	Caleb Birchler DO
	John Bizal MD
	Glenn Blackwood MD
	Wayland Blikken MD
	William Blume MD

Michael Boger MD
Jeffrey Bohling MD
Shafe Boles MD
Phillip Boren MD
Ritu Bordia MD
Konstantin Boroda MD
Michael Boyd DO
Matthew Boyer MD
Robert Bradfield MD
Carla Brandt MD
Mallory Bray MD
Bruce Brink DO
Suzette Broshears MD
David Brougher MD
Thomas Brummer MD
Denise Bruneau MD
James Buckmaster MD
Kent Burress DPM
Todd Burry MD
Tai Byun MD
Juan Cabrera MD
Louis Cady
Shannon Calhoun DO
Julia Caldwell MD
Kathryn Cambron MD
Harold Cannon MD
David Carlson MD
Joseph Carr MD
Craig Carter MD
Marcia Cave MD
Dominic Cefali MD
Chris Chacko MD
Jeffery Chandler MD
Chandrasekhar Cherukupalli MD
Eugene Chung MD
Ashley Cobb DO
Jason Conaughty MD
James Conkright MD
John Cooper DPM
David Cottom MD

Jeffrey Coursen MD
Anthony Czaplicki, III MD Nidal Dabbasi MD
Edward Daetwyler MD
Paul Daines DPM
Joseph Dalton MD
Mariellen Dentino MD
Jason Denton DPM
John Deppe MD
Cory Dixon MD
Richard D'Mello MD
John Doepker MD
Pedro Dominguez MD
Michael Drake MD
 Leonid Drozhinin MD
Omar Dukar MD
Michael Dukes MD
Dion Dulay MD
Michael Dymond MD
Franklin Edge DMD
David Eggers MD
Ahmed Elantably MD
Clinton Ellingson MD
Donald Elshoff MD
Quentin Emerson MD
Judith Englert MD
Craig Erickson MD
Caylee Ervin DMD
Braxton Facer DPM
Faris Fadheel MD
John Fallon MD
Dusky Rideout Farmer DPM
William Farnsworth DDS
Robert Fawcett MD
Terry Fenwick MD
Geoffrey Fey MD
Matthew Field MD
Laura Finch MD
Charles Fischer MD
Kathleen Flannagan MD

Gene Flick MD
Kimberly Foster MD
Jeffrey Fowler MD
Jason Franklin DO
Jon Frazier MD
Minot Fryer MD
Bradley Fulkerson DMD
Anthony Funke MD
Prasad Gade MD
Renee Galen MD
John Gallagher MD
James Gamble MD
Connie Gapinski MD
Kara Geoghegan MD
Gardar Gislason MD
Eric Goebel MD
E. Gourieux MD
David Greer MD
Jason Grennan MD
Aaron Gries MD
Darla Grossman MD
John Guletz MD
Mythili Gurram MD
Guido Gutter MD
Lotfi Hadad MD
Timothy Hamby MD
Walter Hancock DPM
Cary Hanni MD
Scott Hardigree MD
Isaac Hargett MD
James Hargett MD
Thomas Harmon MD
Ben Harned MD
Ellen Harpole MD
Gregory Hayden MD
David Hayes MD
David Hayhurst DDS
Corazon Hazlett MD
John Heidingsfelder MD
Irvin Heimburger MD
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James Heinrich MD
Anna Helms MD
Jeffrey Hemmerlein MD
David Henley MD
Glenn Henning DPM
Steven Herf MD
Jennifer Herrell MD
Jeffrey Hiester DDS
Chester Higdon MD Frank Hilton MD
Anders Holm MD
Geoffrey Hulse MD
Vernon Humbert MD
Roberto Iglesias MD
Thomas Ison DMD
David Jackson MD
Umesh Jairath MD
Jonathan Jaksha MD
Kamran Janjua MD
Maritza Jenkins DMD
Andrea Jester MD
Aditi Jindal DMD
Alan Johnson MD
Lawrence Judy MD
David Julian MD
Rupal Juran MD
Francis Kadiyamkuttiyil MD
Anthony Kaiser MD
Aaron Kamer MD
Edwin Kasha MD
Maurice Keller DDS
Kari Kernek MD
Samir Khanjar MD
Amneet Khera DO
Dawn Kirkwood MD
Philip Kline MD
Peter Knoll MD
Jane Koch DPM
Alvin Korba MD
Radomir Kosanovic MD

Patra Kastandy MP
Petro Kostandy MD
Edward Kowlowitz MD
Maragowdanahall Krishna MD
Nicholas Kuchle MD
Mahesh Kudrimoti MD
Duane Kuhlenschmidt MD
Chandrashekar Kumbar MD
Raymond Lamey MD
Randy Lance MD
Alexander Lanigan MD
Sean Larner DO
Katharine Lasher MD
John Lawler MD
Steven Ledford DDS
William Lehmkuhler MD
Susan Leinenbach MD
Alfred Lessure MD
David Lippman MD
Mark Logan MD
Jason Lowrey MD
Larry Lutz MD
Michael Malchioni MD
David Malitz MD
Clovis Manley MD
Brandon Mansoor MD
Stelios Mantis MD
Ross Marburger MD
Angela Martin MD
Heather Matheson MD
Mario Matos-Cruz MD
Barney Maynard MD
Joseph McConaughy MD
Kevin McConnell MD
Gregory McCord MD
Steven McCormack MD
James McDaniel MD
Francis McDonnell MD
Bryan McDowell MD
Michael McFadden MD
Aziz-Ullah Mehrzad MD
ALIZ GRAIT MICHIZAA MID

Matthew Mendlick MD
Farukh Mian MD
Daniel Michel MD
Lorin Mickelsen DPM
Josel Mijares MD
Charles Milem MD
Mark Morrison MD
Aaron Mull MD
Samuel Murala MD
Kenneth Nachtnebel MD
John Nay MD
Tyler Neitlich MD
Glenn Norton DMD
John Oak MD
Robert Oswald MD
 Young Paik MD
Kenneth Parker MD
Reinaldo Pastora MD
Maria Peduk MD
Robert Penkava MD
William Penland MD
Maruthi Penumetsa MD
Ahmet Percinel MD
Paul Perry MD
Andrew Piering MD
Andrew Pfaff MD
John Polin MD
Alejandro Pontaoe MD
Rodney Porro MD
Chad Potteiger DO
David Powell DPM
Vajravel Prasad MD
Sally Primus MD
Richard Probert MD
Donald Pruitt MD
Aaron Pugh DO
David Purdom MD
John Pulcini MD
Mohammed Quraishi MD
Andrew Rader DPM
Anurew Rader Drivi

Duna Dadhaluishnan MD
Rupa Radhakrishnan MD
Norman Radtke MD
Shereef Ramadan MD
James Rang MD
Christie Reagan MD
Nathan Reed MD
Charlotte Reisinger DPM
Nicholas Rensing MD
Arich Reynolds MD
Gary Riddle MD
Richard Rink MD
Lowell Rogers MD
James Rold MD
Allison Royer MD
Steven Rupert DO
Herman Rusche MD
Kristen Rush Heavin MD
Umair Saleem MD
Andrew Saltzman MD
Jason Samuel MD
Mahendra Sanapati MD
Reginald Sandy DO
Robert Sauer MD
Christine Schaffer DO
Sanford Schen MD
Caitlin Schultheis MD
Michael Schultheis MD
David Schultz MD
Brian Schymik MD
Constantine Scordalakes MD
Darin Serletic DPM
Frank Sewell MD
Rajiv Sharma MD
Glenn Sherman DO
Devdas Sheth MD
Curtis Shinabarger MD
Roger Shinnerl MD
Daniel Shirey MD
Mark Shockley MD
Robert Shumate DMD

Dwight Silvera MD
Larry Sims MD
Moges Sisay MD
Moges Sisay MD
Charles Sisovsky DPM
Richard Sloan MD
Christopher Sneed MD
Michael Snyder MD
Walter Sobczyk MD
Drew Sommerville MD
Terry South MD
Harold Sparks DO
Robert Spear MD
Alicia Stafford MD
Andrew Strand DO
Robert Starrett MD
James Stearns MD
Randall Stoltz MD
Jennifer Stone MD
Andrew Strand DO
Michael Sutton MD
Terry Talley MD
Srikanth Tamma MD
Satyam Tatineni MD
Naji Tawfik MD
David Tenbarge MD
Terry Thacker MD
Killol Thakore MD
Andrew Tharp MD
John Thole MD
Srinivasa Thota MD
Erik Throop MD
Richard Tibbals MD
Tyler Tidwell DPM
Mary Tisserand MD
Hoang Tran MD
Neil Troffkin MD
Mitchell Troyer DDS
Gary Underhill MD
Kutluay Uluc MD
Radiady Olde MD

Santi Vibul MD
Robert Vogt MD
Thomas VonderHaar MD
Ketan Vyas MD
J Waddell MD
Lee Wagmeister MD
David Wahle MD
Joseph Waling MD
Allen Walker MD
Todd Wannemuehler MD
Roderick Warren MD
Lisle Wayne MD
Emil Weber MD
Brett Weinzapfel MD
Mell Welborn MD
Frank Welte MD
Stacie Wenk DO
Ryan Wetzel MD
Jonathan Weyer MD
David Whitney MD
Jason Wiles MD
Danica Wilking MD
Mark Wohlford DDS
Robert Woodall MD
Jay Woodland MD
Mona Wooten MD
Brandon Wynn DO
Hongyu Yang MD
David Yates DMD
Prasanna Yelamanchili MD
Mubashir Zahid MD
Joshua Zara MD
Paul Zieg MD
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