

Financial Assistance Policy – Plain Language Summary

Financial Assistance Offered: Adventist Health Columbia Gorge (Adventist Health) offers financial assistance, under its Financial Assistance Policy, to eligible patients unable to pay for emergency or other medically necessary care.

Eligibility Requirements and Assistance Offered: Eligibility for financial assistance is based on many factors including the nature of the condition and care required, insurance coverage or other sources of payment, income, family size, assets, OR state residency and any special considerations the patient or physician would like to have considered.

Patients seeking financial assistance must comply with the Financial Assistance application process. This includes submitting the patient's W-2 statement, current pay stubs, bank statements or last year's income tax return, **and** completing the application process for all available sources of assistance, including state subsidized care (Medicaid).

Asset and expense information will only be considered for hospital services or for applicants above 200% of Federal Poverty Level (FPL). For National Health Service Corps (NHSC) sites, only income and household size are considered for patients at or below 200% of the Federal Poverty Level.

How to Apply for Assistance and What is Eligible for Assistance: The patient or any person involved in the care of the patient, including a family member or provider, can express financial concerns at any point. The patient or responsible party will then be encouraged to complete a financial assistance application. To qualify for financial assistance, an application can be submitted at any time prior to account receiving a court judgment. Financial assistance is limited to medical care provided at an Adventist Health Columbia Gorge location by Adventist Health medical personnel.

Amount Generally Billed (AGB): A patient who needs help cannot be charged more than "amounts generally billed" for emergency or other medically necessary care than patients who have insurance for the same care.

Where to Obtain Copies, Submit Documents and Contact Information: Adventist Health's Financial Assistance Policy, Financial Assistance Application and Plain Language Summary are available free of charge. These documents can be accessed in multiple languages online, by phone or in person. Documents are online to download or print at https://www.mcmc.net/for-patients-guests/financial-information/. You can ask for your copy by calling the location where you are seeking care.

The completed application with all documentation can be mailed or faxed to:

Adventist Health Columbia Gorge Attn: Patient Accounts PO Box 1580 The Dalles, OR 97058 Fax (541) 296-7619

If you wish to submit your completed application in person, please stop by:

Adventist Health Columbia Gorge Patient Accounts 1810 E 19th St., Suite 107 The Dalles, OR 97058

Adventist Health will uphold the confidentiality and dignity of each patient. Any information submitted for consideration of financial assistance will be treated as protected health information under the Health Insurance Portability and Accountability Act (HIPAA).

Adventist Health Columbia Gorge

Patient Financial Advocate 1700 E. 19th St. The Dalles, OR 97058 Phone 541.296.7221

Adventist Health Columbia Gorge

Patient Accounts PO Box 1580 1810 E 19th St., Suite 107 The Dalles, OR 97058 Phone 541-296-7504 FAX 541.296.7619