



Ascension Providence Rochester Hospital

Plain Language Summary of Financial Assistance Policy

Revised September 14, 2018

Ascension Providence Rochester Hospital has a commitment to and respect for each person's dignity with a special concern for those who struggle with barriers to access healthcare services. Ascension Providence Rochester Hospital has an equal commitment to manage its healthcare resources as a service to the entire community. In furtherance of these principles, Ascension Providence Rochester Hospital provides financial assistance for certain individuals who receive emergency or other medically necessary care from Ascension Providence Rochester Hospital. This summary provides a brief overview of Ascension Providence Rochester Hospital Financial Assistance Policy.

Who Is Eligible?

You may be able to get financial assistance. Financial assistance is generally determined by your total household income as compared to the Federal Poverty Level. If your income is less than or equal to 250% of the Federal Poverty Level, you will receive a 100% charity care write-off on the portion of the charges for which you are responsible. If your income is above 250% of the Federal Poverty Level but does not exceed 400% of the Federal Poverty Level, you may receive discounted rates on a sliding scale. Patients who are eligible for financial assistance will not be charged more for eligible care than the amounts generally billed to patients with insurance coverage.

What Services Are Covered?

The Financial Assistance Policy applies to emergency and other medically necessary care. These terms are defined in the Financial Assistance Policy. Elective services are not covered by the Financial Assistance Policy.

How Can I Apply?

To apply for financial assistance, you typically will complete a written application and provide supporting documentation, as described in the Financial Assistance Policy Instructions and the Financial Assistance Policy application.

How Can I Get Help with an Application?

For help with a Financial Assistance Policy application, you may contact the Financial Counseling Office staff at Ascension Providence Rochester Hospital at 248-652-5334 located at 1101 West University Road, Rochester Michigan 48307.

How Can I Get More Information?

Copies of the Financial Assistance Policy and Financial Assistance application form are available at <https://healthcare.ascension.org/Financial-Assistance/Michigan> and at all Registration locations and Financial Counselor Office. Free copies of the Financial Assistance Policy and Financial Assistance application also can be obtained by mail by calling the Financial Counseling Office at 248-652-5334. Additional information about the Financial Assistance Policy can be obtained by calling the Financial Counselor at 248-652-5334 or visit the office which is located at 1101 West University Road, Rochester Michigan 48307.

What If I Am Not Eligible?

If you do not qualify for financial assistance under the Financial Assistance Policy, you may qualify for other types of assistance. For more information, please contacting Financial Counselor at Ascension Providence Rochester Hospital at 248-652-5334 or visit the office located at 1101 West University Road, Rochester Michigan 48307.

Translations of the Financial Assistance Policy, the Financial Assistance Policy application, and this plain language summary are available in the following languages upon request:

English, Spanish, Arabic, Chinese, Italian, Polish, German, Japanese, Serbo-Croatian, Russian, Korean, Vietnamese, Hindi, and Tagalog