

ASCENSION SETON

DELL CHILDREN'S MEDICAL CENTER OF CENTRAL TEXAS

ASCENSION SETON MEDICAL CENTER AUSTIN

ASCENSION SETON BASTROP

ASCENSION SETON HAYS

ASCENSION SETON WILLIAMSON

ASCENSION SETON NORTHWEST

ASCENSION SETON SOUTHWEST

ASCENSION SETON EDGAR B. DAVIS

ASCENSION SETON HIGHLAND LAKES

ASCENSION SETON SHOAL CREEK

ASCENSION SETON SMITHVILLE

DELL SETON MEDICAL CENTER AT THE UNIVERSITY OF TEXAS

Summary of Financial Assistance Policy

Ascension Seton, including the health ministries listed above, have 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 Seton has an equal commitment to manage its healthcare resources as a service to the entire community. In furtherance of these principles, Ascension Seton provides financial assistance for certain individuals who receive emergency or other medically necessary care from Ascension Seton. This summary provides a brief overview of Ascension Seton's Financial Assistance Policy.

Who Is Eligible?

You may be able to get financial assistance if you live in 1.) Central – Travis County, 2.) South – Hays and Caldwell Counties, 3.) North – Williamson County, 4.) West – Burnet, Blanco and Llano Counties, and 5.) East – Bastrop, Fayette, Gonzales and Lee Counties, and San Saba County. 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 may 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. If you have medical debt for emergency and medically necessary care that exceeds your income, you may be eligible for a discount. If you have assets in excess of 250% of your Federal Poverty Level income amount you may not qualify for financial assistance. You may have to pay a small flat charge for services. 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. All other care is 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 and the Financial Assistance Policy application.

The Financial Assistance Policy application and Financial Assistance Policy application instructions will be made available upon patient request at the time of service.

If a patient wishes to apply for financial assistance after the day(s) of service, a patient may access the Financial Assistance Policy application and Financial Assistance Policy application instructions and print directly from Ascension Seton's website.

Patients may also request a copy of the Financial Assistance Policy application and Financial Assistance Policy application instructions by mail. To request a copy of the documents by mail, patients should call the hospital Patient Financial Services department at 512-324-1125 or the Ascension Medical Group customer service at 512-324-8960.

How Can I Get Help with an Application?

For help with a Financial Assistance Policy application, you may contact the Patient Financial Services department by telephone at 512-324-1125 or 800-749-7624. Additional assistance is also available upon request in any admissions area.

How Can I Get More Information?

Copies of the Financial Assistance Policy and Financial Assistance Policy application form are available at www.healthcare.ascension.org/Financial-Assistance/Texas. Free copies of the Financial Assistance Policy and Financial Assistance Policy application also can be obtained by mail by calling the Patient Financial Services department at 512-324-1125. Additional information about the Financial Assistance Policy is also available upon request in any admissions area or by telephone at 512-324-1125 or 800-749-7624.

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 contact by telephone at 512-324-1125 or 800-749-7624.

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

English, Spanish, Chinese, Vietnamese, Korean, and Arabic.