ASCENSION BORGESS

Ascension Borgess Hospital
Ascension Borgess-Lee Hospital
Ascension Borgess-Pipp Hospital
Ascension Borgess Allegan
Ascension Medical Group

Summary of Financial Assistance Policy

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

Who Is Eligible?
You may be able to get financial assistance if you live in Kalamazoo or Cass Counties. 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\% 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. 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.¹

¹ Percentage should be the same as set in the FAP. As noted in the FAP, Health Ministries may adjust the 250\% threshold higher, but not lower, for cost of living utilizing the local wage index compared to national wage index.
² Percentage should be the same as set in the FAP. As noted in the FAP, Health Ministries may adjust the 400\% threshold higher or lower for cost of living utilizing the local wage index compared to national wage index.
**How Can I Get Help with an Application?**
For help with a Financial Assistance Policy application, you may contact Customer Service at (269) 226-7281 or (800) 944-3345.

**How Can I Get More Information?**
Copies of the Financial Assistance Policy and Financial Assistance Policy application form are available at [https://healthcare.ascension.org/Financial-Assistance/Michigan](https://healthcare.ascension.org/Financial-Assistance/Michigan) and at any Ascension Borgess registration or check-in location. Free copies of the Financial Assistance Policy and Financial Assistance Policy application also can be obtained by mail by calling Customer Service at (269) 226-7281 or (800) 944-3345. Additional information about the Financial Assistance Policy also is available at any Borgess Health registration or check in location or by telephone at (269) 226-7281 or (800) 944-3345.

**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 Customer Service at (269) 226-7281 or (800) 944-3345.

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:

Spanish