



Financial Assistance Policy Plain Language Summary

PURPOSE:

To notify and inform patients and their responsible parties of the financial assistance programs and policies that the hospital administers to assist those who are most likely to require financial assistance.

POLICY:

Financial Assistance Program: Akron Children's Hospital (Children's) is committed to providing quality care to the patients we serve, regardless of ability to pay. Children's complies with the Emergency Medical Treatment and Labor Act (EMTALA), and the Joint Commission requirements relative to the provision of emergency medical treatment regardless of financial circumstances or their qualification under this Financial Assistance Policy. Furthermore, Children's will not discourage individuals seeking emergency medical treatment and medically necessary care by requiring payment prior to treatment or permitting debt collection activities that interfere with the provision of emergency medical care.

Children's offers a robust Financial Counseling Program to assist families in obtaining third-party coverage including commercial insurance, Medicaid, and other state and local programs. Where there is no coverage available Financial Counseling will assist with pursuing eligibility for financial assistance. Financial assistance will be based upon residence, family income, and size for those patients who are uninsured or underinsured. Financial assistance will be extended only after all available third-party resources have been exhausted or the patient is ineligible for third-party benefits.

HOSPITAL CARE ASSURANCE PROGRAM (HCAP/FREE CARE):

Individuals may be eligible for the Hospital Care Assurance Program (HCAP/Free Care) Program if they are a resident of Ohio, have gross income at or below federal poverty level, and are not a Medicaid recipient.

CHILDREN'S CHARITY CARE PROGRAM:

Individuals who are determined to be eligible for HCAP or Medicaid will be asked to apply for those programs before being considered for eligibility for Children's charity care program. If not eligible for Medicaid or HCAP, an individual may be eligible for Children's Charity Care Program. Individuals must be a resident of Ohio or Pennsylvania, and have gross income that is below 300% of the federal poverty level income guidelines.

Amount Generally Billed (AGB): Patients eligible for financial assistance will not be charged more for emergency or other medically necessary care than amounts generally billed to those patients who have insurance.

How to Apply for Financial Assistance: The Financial Assistance Application, as well as the Financial Assistance Policy and this Plain Language Summary are available, in different languages, via the following:

- Call a financial counselor at 330-543-2455 and request a free copy to be mailed or emailed
- Email our financial counselors at FinCounsel@akronchildrens.org to request a copy via mail or email
- Write to Financial Counseling at One Perkins Square, Akron, OH 44308 and request that copies be mailed, free of charge
- Visit the Akron Children's website at <https://www.akronchildrens.org/pages/Financial-Assistance.html>
- In person at our Admitting Office located on the third floor of the Hospital at One Perkins Square, Akron, OH, 44308

Documentation Requirements: Applicants must provide documentation to verify information relevant to a determination of eligibility, including information regarding citizenship, residence and income.