



Financial Assistance and Charity Care Policy

Russellville Hospital, Inc.

Article I. Scope, Parties, and Purpose

Section 1.01 Scope. This Financial Assistance and Charity Care Policy ("Policy") applies to Russellville Hospital, Inc. and all entities controlled by Russellville Hospital, Inc. (collectively, Russellville Hospital").

Section 1.02 Purpose. Under the Patient Protection and Affordable Care Act and Internal Revenue Code Section 501(r), non-profit hospitals must establish a written financial assistance policy, adopted by the governing board of the hospital and implemented by the hospital leadership and personnel. This Policy applies to patients who may need Charity Care (as defined below) or Financial Assistance (as defined below) and makes clear that Russellville Hospital will provide, without discrimination, necessary medical care regardless of the patient's ability to pay for the services.

Section 1.03 Available Benefits. Charity Care (as defined below) and Financial Assistance (as defined below) are available to patients who qualify under this Policy. Underinsured and uninsured patients who do not meet charity guidelines may qualify for Financial Aid (as defined below). This Policy addresses only the most common situations that may arise, and it is not intended to be all-inclusive.

Section 1.04 Policy Outline. This Policy shall clarify Russellville Hospital's available assistance by providing the following information:

- (a) Includes eligibility criteria for Financial Aid;
- (b) Describes the basis for calculating discount amounts to patients eligible for Financial Aid under this Policy;
- (c) Describes the method by which patients may apply for Financial Aid;
- (d) Describes how Russellville Hospital will widely publicize this Policy within the community served by Russellville Hospital; and
- (e) Limits the amounts that Russellville Hospital will charge for emergency and other medically necessary care provided to individuals eligible for Financial Aid to the amount generally billed for medically necessary care.

Article II. Definitions.

Section 2.01 Board. The Board of Directors of Russellville Hospital.

Section 2.02 Charity Care. Free care for people who are uninsured for the services they need; can't receive governmental or other insurance coverage; and have family income at such standard that they would qualify under the Financial Ability standard below.

Section 2.03 Emergency Medical Condition. Condition manifesting itself by acute symptoms of sufficient severity, including severe pain, such that the absence of immediate medical attention could reasonably be expected to result in placing the individual's health, or the health of an unborn child, in serious jeopardy, serious impairment to bodily functions, or serious dysfunction of bodily organs (or as otherwise defined under the federal Emergency Medical Treatment and Active Labor Act, 42 U.S.C. §1395dd ("EMTALA")).

Section 2.04 Financial Aid. Charity Care and Financial Assistance, collectively, available at Russellville Hospital.

Section 2.05 Financial Assistance. Care at a discounted rate for people who are uninsured for the services they need, cannot receive governmental or other insurance coverage, and have family income at such standard that they would qualify under the Financial Ability standard below.

Article III. Eligibility Criteria.

After an assessment of Medical Necessity and Financial Ability, Russellville Hospital may provide Financial Aid to patients who qualify under this Policy. Russellville Hospital will follow standard procedures in determining eligibility for Financial Aid as follows:

Section 3.01 Medical Necessity.

- (a) Any patient seeking care for Emergency Medical Conditions at a Russellville Hospital facility shall be treated without discrimination and without regard to a patient's ability to pay for care. Russellville Hospital shall operate in accordance with all federal and state requirements for the provision of urgent or emergency health care services, including screening, treatment, and transfer requirements under EMTALA.
- (b) In addition to services provided pursuant to EMTALA, Russellville Hospital will extend Financial Aid to eligible individuals for all other non-elective medically necessary services.

Section 3.02 Financial Ability.

- (a) To be eligible for Charity Care, the patient's household income, adjusted for family size, retrospectively and prospectively for the six months from the determination must be less than or equal to 200% of the current Federal Poverty Guidelines.
- (b) To be eligible for Financial Assistance, the patient's household income, adjusted for family size, retrospectively and prospectively for the six months from the determination must be greater than or equal to 201%, but not more than 300% of the Federal Poverty Guidelines.
- (c) Patients eligible for Medicaid or other federal or state indigent care programs may be eligible for Charity Care or Financial Assistance for non-covered services (including charges for days exceeding any length of stay limit).

Section 3.03 Rates.

- (a) If the patient's household income is between 0%-200% of the Federal Poverty Guidelines, 100% discount (Charity Care).
- (b) If the patient's household income is between 201%-250% of the Federal Poverty Guidelines, 60% discount (Financial Assistance).
- (c) If the patient's household income is between 251%-300% of the Federal Poverty Guidelines, 40% discount (Financial Assistance).

Section 3.04 Amounts Generally Billed. Russellville Hospital determines the amount generally billed ("AGB") by multiplying the gross charges for any emergency or other medically necessary it provides to a Financial Aid-eligible individual by an AGB percentage relative to Russellville Hospital. Russellville Hospital calculates the AGB percentage based on all claims allowed by Medicare and private health insurers over a specified 12-month period, divided by the associated gross charges for those claims. In all situations, once a patient is determined to be Financial Aid-eligible, that individual will not be charged more for emergency or other medically necessary care. Russellville Hospital may adjust the AGB as needed as determined by Russellville Hospital administration. See Exhibit A, attached hereto.

Article IV. Non-Eligible Services or Patient Responsibilities.

Financial Aid will not be awarded for the following services or patient responsibilities, including but not limited to the following:

- (a) Cosmetic procedures that are not medically necessary;
- (b) Co-payments and deductible amounts due from patients who are covered by other insurance (Medicare, Medicaid, automobile insurance, worker's compensation, or liability insurance);
- (c) Balances payable by other insurance;
- (d) Ventricular Assist Devices;
- (e) Transplants; and
- (f) Elective procedures for patients.
- (g) This policy is not applicable to physicians, immediate family members of a physician (as defined in 42 C.F.R §417.351, as amended) or to any patient who is a referral source to Russellville Hospital.

Article V. Determination and Screening Process

Section 5.01 Financial Aid Application. All patients seeking Financial Aid are required to complete the Russellville Hospital Financial Aid Application, a copy of which is attached hereto. Patients will be instructed to complete the forms and return them by mail or in person to a Financial Aid Specialist. Patients must cooperate with Russellville Hospital to provide information and documentation necessary to apply for Financial Aid. --- Patients who qualify for Financial Assistance must cooperate with Russellville Hospital to establish a reasonable payment plan.

Section 5.02 Factors in Assessing Financial Need. The granting of Financial Aid shall be based on an individualized determination of financial need and medical necessity. Factors that may be considered include, but are not limited to, household size, income level, short-term layoffs, and other available means of payment.

Section 5.03 Application Assistance. Patients who appear to qualify for government assistance will be offered courtesy assistance with the application process. Unfunded or underfunded patients will be asked to complete Russellville Hospital Financial Aid Application at the time of registration. Financial Aid counseling communication will be clear, concise, and considerate of the patient and family members. Patients may be required to provide income and family information in addition to proof of employment. Some patients may also be asked to provide additional information about their assets, monthly expenses, and any other resources to pay for their care.

Section 5.04 Grant or Denial of Assistance. Determination of eligibility or denial of Financial Aid will be communicated to the responsible party within thirty (30) days of receipt of all required documentation. The granting of Financial Aid shall be based on an individualized determination of financial need and medical necessity.

Article VI. Relationship to Billing and Collection Policy.

Russellville Hospital maintains a separate policy outlining its billing and debt collection procedures. In accordance with its Billing and Collection Policy, Russellville Hospital will not engage in, nor will they authorize their collection agencies to engage in, Extraordinary Collection Actions without verifying that patients have been given the opportunity to apply for Financial Aid.

Article VII. Record Keeping.

Section 7.01 Maintenance of Records. A record, paper or electronic, will be maintained reflecting authorization of Financial Aid, along with copies of the Russellville Hospital Financial Aid Application and other documentation provided upon request.

Section 7.02 Retention of Records. Summary information regarding Russellville Hospital Financial Aid Applications processed and Charity Care and Financial Assistance provided will be maintained for a period of seven years. Summary information includes the number of patients who applied for Financial Aid at Russellville Hospital, how many patients received Financial Aid, the amount of Financial Aid provided to each patient, and the total bill for each patient.

Section 7.03 Reporting. The cost of Financial Aid will be reported annually in the Russellville Hospital's Community Benefit Report. Financial Aid will be reported as the cost of care provided, not charges, using the most recently available operating costs and the associated cost to charge ratio.

Article VIII. Additional Information.

Section 8.01 Communication of Assistance Available. Notification about Charity Care and Financial Assistance available from Russellville Hospital shall be disseminated to the community by various means, which may include, but are not limited to, publishing this Policy on Russellville Hospital's websites, placing posters or notifications around the Russellville Hospital, and making brochures available at all patient registration areas through a conspicuous display in a manner reasonably calculated to reach community members most likely to need Charity Care or Financial Assistance.

Section 8.02 Regulatory Requirements. In implementing this Policy, Russellville Hospital will comply with all other federal, state, and local laws, rules and regulations that may apply to activities conducted pursuant to this Policy.

Section 8.03 Availability of Forms and Policy. Copies of this Policy and Russellville Hospital Financial Assistance Applications will be made available upon request and without charge by contacting a Financial Assistance Specialist or by submitting a written request to Russellville Hospital, Attn: Financial Assistance Department. Russellville Hospital's Financial Assistance Specialists are also available to answer any questions about this Policy.

Approved by the unanimous Written Consent of the Board of Directors as of the 17th day December, 2020.

EXHIBIT A

AGB Calculation

AGB% =26%

AGB%= (all claims allowed by Medicare and private insurers)/gross charges