

## PLAIN LANGUAGE SUMMARY

### **Financial Assistance Policy**

It is the intention of Peninsula Regional Medical Center (PRMC) to make available to all patients the highest quality of medical care possible within the resources available. If a patient is unable to pay due to financial resources, all efforts will be made to help the patient obtain assistance through appropriate agencies, or, if no help is available, to render care at a reduced or zero cost for emergency and medically necessary care.

Patients requiring elective services may, through consultation with their physician, have their procedure postponed until such time as the patient is able to make full payment or meet the established deposit. Elective procedure patients who, according to their diagnosis and/or their physician, cannot have their procedure postponed will be helped with obtaining assistance from agencies. If no assistance is available, and the patient requests, the account will be reviewed for possible financial assistance.

Peninsula Regional Medical Group (PRMG) physician charges are not included in the hospital bill and are billed separately, with the exception of self-pay balances. Self-pay balances for hospital services and PRMG services will appear on the same statement. Physician charges outside of the PRMG group are not included in the hospital bill and will be billed separately. Physician charges outside of PRMG are not covered by Peninsula Regional Medical Center's financial assistance policy. A list of providers that deliver emergency and other medically necessary care at PRMC is provided on the website at [www.peninsula.org/prmg](http://www.peninsula.org/prmg), indicating which providers are covered under PRMC's financial assistance policy and which are not, or you may call 410-912-4974.

In the event that the patient has applied for and kept all necessary appointments and third party assistance is not available, the patient may be eligible for financial assistance.

### **Eligibility Determination Process**

1. Interview patient and/or family.
2. Obtain annual gross income.
3. Determine eligibility (*preliminary eligibility within 2 business days*).
4. Screen for possible referral to external charitable programs.
5. If the patient and/or family refuse to disclose financial resources or cooperate, the patient will be subject to standard collection efforts. No Extraordinary Collection Actions (ECA) will be taken for at least 120 days from the first post-discharge billing statement.
6. All applications received within 240 days of the first post-discharge billing statement will be reviewed. ECA actions will be suspended until the application has been processed.
7. The determination of eligibility (*approval or denial*) shall be made in a timely manner.

### **How to Apply**

- Applications can be taken orally by calling 877-729-7762 between 8:00 a.m. and 5:00 p.m., Monday through Friday
- In person at the Financial Counselor's office (located in the Frank B. Hanna Outpatient Center lobby) between 8:00 a.m. and 4:00 p.m., Monday through Friday
- Mailing a request for an application to Peninsula Regional Medical Center, PO Box 2498, Salisbury, MD 21802-2498
- On the internet at <https://www.peninsula.org/patients-visitors/patient-forms> or <https://www.peninsula.org/patients-visitors/billing-center> or <https://www.peninsula.org/patients-visitors/billing-center/billing-information>
- Applications are available in English and in Spanish

### **Qualifications**

Peninsula Regional Medical Center compares the patient's income to the Federal Poverty Guidelines. In order to process your application we require the following information:

- An independent third party to verify your household income (one of the following)
  - a. Recent pay stub showing current and year-to-date earnings
  - b. Most recent tax return showing your Adjusted Gross Income or W-2 form
  - c. Written documentation of Social Security benefits, SSI disability, VA benefits, etc.
  - d. If no income, a letter from an independent source such as a clergy or neighbor verifying no income
  - e. Completed application

This information, and any information obtained from external sources, is used to determine your eligibility for financial assistance. The more information provided, the easier it is for us to determine your financial need. Peninsula Regional may request a credit report to support a patient's application for assistance.

### **Need Assistance?**

If, at any time, you have questions about obtaining financial assistance, your hospital bill, your rights and obligations with regard to the bill, or applying for the Maryland Medical Assistance Program, please contact Peninsula Regional Medical Center's Financial Services Department at 410-912-6957 or 877-729-7762. You can obtain a copy of the PRMC Financial Assistance Policy at <https://www.peninsula.org/patients-visitors/patient-billing-information/financial-assistance-documents>.

### **Maryland Medical Assistance Program**

To find out if you are eligible for Maryland Medical Assistance or other public assistance, please apply at your local Department of Social Services (DSS) office, or you may visit [mmcp.dhmdh.maryland.gov](http://mmcp.dhmdh.maryland.gov) for information about the various Medicaid programs available. You may apply online for Maryland Medicaid at [marylandhealthconnection.gov](http://marylandhealthconnection.gov). If you are applying for assistance for a child or are pregnant, you may apply for the Maryland Children's Health Program (MCHP). If you are only applying for assistance with paying your Medicare premiums, co-payments, or deductibles, you may apply at your local Department of Social Services (DSS) for the Qualified Medicare Beneficiary (QMB) or Specified Low-Income Medicare Beneficiary (SLMB) Program. QMB/SLMB applications may be filed by mail or in person. Delaware residents may obtain information online at [dhss.delaware.gov](http://dhss.delaware.gov) or apply online at [assist.dhss.delaware.gov](http://assist.dhss.delaware.gov). Virginia residents may obtain information at [dmas.Virginia.gov](http://dmas.Virginia.gov). To receive an application, call your local DSS office or the Area Agency on Aging, (AAA). For more information, you may call the Department of Health and Mental Hygiene's Recipient Relations Hotline at 1-800-492-5231 or 410-767-5800.

### **Patients' Rights and Obligations**

Rights:

- Prompt notification of their preliminary eligibility determination for financial assistance.
- Guidance from Peninsula Regional on how to apply for financial assistance and other programs which may help them with the payment of their hospital bill.
- Receipt of financial assistance for all services not payable by another program that meet the qualifications of Peninsula Regional's Financial Assistance Policy.
- Peninsula Regional Medical Center (PRMC) will provide emergency and medically necessary free and/or reduced-cost care to patients who lack health care coverage or whose health care coverage does not pay the full cost of their hospital bill.

Obligations:

- Submit complete and accurate information on the Uniform Financial Assistance Application in use in the state of Maryland.
- Attach supporting documentation and return the form to Peninsula Regional Medical Center in a timely manner.
- Make payment in full or establish a payment plan for services not qualified under Peninsula Regional's Financial Assistance Policy.

**Cómo hacer la solicitud**

- Llame al 877-729-7762 entre las 9:00 a.m. y las 4:00 p.m., de lunes a viernes
- Acuda en persona a la oficina del consejero financiero (Localizado en el vestíbulo Frank B. Hanna del Centro de atención de Pacientes Externos) entre las 8:30 a.m. y las 4:30 p.m., de lunes a viernes
- A través de Internet, visite [www.peninsula.org](http://www.peninsula.org). Haga clic en Patients & Visitors (Pacientes y visitantes), luego en Patient Financial Services (Servicios financieros para pacientes) y después en Billing Information (Información de facturación)

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