



PLAIN LANGUAGE SUMMARY OF FINANCIAL ASSISTANCE POLICY

Overview

It is the policy of Philip Health Services, Inc. to treat the broadest number of patients and residence residing within our service area while maintaining fiscal responsibility. This is a summary of Philip Health Services, Inc.'s Financial Assistance Policy (**FAP**).

Availability of Financial Assistance

Patient/Resident will be considered for charity or discounted billing based on their ability to pay and the Federal Poverty Guidelines (**FPG**) issued and updated annually. Charity consideration is given to emergency, inpatient, outpatient and medically necessary procedures. Financial assistance and discounts only apply to Philip Health Services, Inc. bills. Professional services provided by providers employed by Philip Health Services are covered under the Philip Health Services Financial Assistance Policy. Services performed by Dakota Radiology or by The Heart Doctors are not covered by Philip Health Services Financial Assistance Policy. Any balance can be considered for charity, including balances after insurance payment. Patients must reside within our service area which includes Haakon and Jackson Counties.

Eligibility Requirements

Financial assistance is generally determined by a sliding scale of total household income based on FPG. The guarantor's household gross income is compared to the FPG. If the household income is less than or equal to 100% of the FPG, 100% of the patient's eligible balance will be forgiven. If the household gross income is more than 100% but equal or less than 200% of the FPG a sliding scale will be applied. No person eligible for financial assistance under the FAP will be charged more for medically necessary care than amounts generally billed (**AGB**) to individuals who have insurance covering such care. Philip Health Services, Inc. determines AGB based on all claims paid in full to Philip Health Services, Inc. by Medicare, Medicaid and private health insurers (including payments by Medicare beneficiaries or insured individuals themselves), over a 12-month period, divided by the associated gross charges for those claims. If an individual has sufficient insurance coverage or assets available to pay for care, he/she may be deemed ineligible for financial assistance. Please refer to full policy for a complete explanation and details.

Where to Obtain Information

There are numerous ways that an individual may obtain information about the FAP application process, or obtain free copies of the FAP or FAP Application form:

Download the information online at www.philiphealthservices.com

Request the information by telephone by calling a Patient Financial Services Rep at (605) 859-2511

In person at Philip Health Services, Inc., 503 West Pine Street, Philip, SD 57567

Availability of Translations

The FAP, FAP Application Form, and this plain language summary shall be prepared in English and for any population more than (a) 1,000 individuals or (b) 5% of the community served by the hospital.