INS-CER-920

Lake Health District
Quality Care Close to Home

Plain Language Summary of District Financial Assistance Policy (FAP)

Lake Health District (LHD) is committed to providing financial assistance to people who have health care needs and are uninsured or underinsured, ineligible for a government program, or otherwise unable to pay for medical necessary care. Financial assistance is based on their individual financial situation and if it is within LHD's guidelines for eligibility.

- **Financial Assistance Guidelines**
  - Financial assistance is only offered for emergency medical care and medically necessary care. The care must be provided by LHD. Medically necessary is for services or items that are reasonable and necessary for the diagnosis or treatment of an illness or injury.
  - Elective procedures, supplies, and non-medically necessary services are not covered under the program. Services not billed by LHD are not eligible for the program.
  - Eligibility is determined after we review the applicant's financial situation.
  - All other payor resources, including governmental payors such as Medicaid, must be used up prior to applying for financial assistance.
  - **Presumptive Financial Assistance Screening**
  - Under Oregon law (ORS 442.615), Lake Health District must screen patients for financial assistance before sending a bill. If a patient is found eligible, that determination remains valid for **nine months** and applies to all medically necessary services during that time.
    - **Key Points:**
    - If no prior eligibility is found, we will automatically screen you using existing information.
    - You may voluntarily provide household size or income to assist with screening.
    - Based on the results, you may be offered presumptive eligibility or invited to apply formally for Financial Assistance.
    - Once approved, the same discount applies to all services for 9 months, even if your income changes. REVIEW for Presumptive vs. Financial Assistance Application submission.
    - If you were approved in the past 9 months, you do not need to reapply.
    - **Note:** Patients cannot opt out of this screening. However, you may decline financial assistance if approved.

- **Required Documentation to Apply for Financial Assistance**

  To be complete, the application must include:

  - A complete and signed Financial Assistance application.
  - Copies of previous year's Federal Tax Return (Form 1040 or equivalent). Please include all schedules.
  - Proof of current income, if any. For example, the last 3 months pay stubs, pension and retirement benefits, Social Security benefits, unemployment compensation, Workers Compensation, Veteran's Retirement benefits, etc.

  If a person has no source of income, a letter of hardship and/or a letter of support will be accepted. Other documents may be asked for by LHD to confirm information on the application.

- **Program Qualifications**
  - Financial assistance will be given to a person if their annual gross income meets certain criteria. Annual gross income includes the annual income of the person and spouse.
  - Patients whose family income is at or below 150% of the FPL are eligible to receive full financial assistance.
  - Patients whose family income is above 150% but less than 400% of the FPL are eligible to receive services that are discounted. The discount amount is on a sliding schedule.
  - Services will be discounted to an amount no greater that the amounts generally received by LHD for Medicare patients.

- **How Do I Get Copies of the Financial Assistance Policy and Application?**
  - Copies of the Financial Assistance Policy and Application are available upon request.
  - All documents are provided free of charge.
  - All documents can be mailed upon request.
  - All documents are available on the Lake Health District (LHD) web site, Financial Assistance – www.lakehealthdistrict.org.
  - To get copies of these documents, you can contact the LHD Business Office, Clinical Front Offices, Emergency Room:
    - Phone: 541-947-2114 ext.435 (Patient Services)
    - In person: LHD Business Office, 700 S. J St., Lakeview OR 97630

- **What If I Have Questions or Need Help Filling Out the Application?**

  If you have questions or need help filling out the Financial Assistance Application, you can contact the LHD Business Office:

  - Phone: 541-947-2114 ext.435 (Patient Services)
  - In person: LHD Business Office, 700 S. J St., Lakeview OR 97630