



## FINANCIAL ASSISTANCE POLICY: PLAIN LANGUAGE SUMMARY

- **Financial Assistance Offered**

Donalsonville Hospital takes pride in providing the best care for every patient. Donalsonville Hospital offers financial assistance to patients unable to pay for emergency and medically necessary care.

- **Am I Eligible?**

Patients who have the means to pay are expected to pay for services received at Donalsonville Hospital. However, eligibility for financial assistance is available to you and is based on multiple factors, including insurance coverage, income (Federal Poverty Level guidelines used to determine the amount of financial assistance offered), family size, assets, residency, and other medical bills.

Financial assistance is offered to patients who are uninsured and underinsured. Partial or full financial assistance will be granted based on a patient's ability to pay the billed charges.

Patients must fully comply with the application process, including submitting tax returns, bank statements and pay stubs, as well as, completing the application process for all available sources of assistance, including Medicaid or other federal programs.

- **How do I apply?**

If you are unable to pay, visit our website [https://www.donalsonvillehospital.org/getpage.php?name=Financial\\_Assistance&sub=Billing](https://www.donalsonvillehospital.org/getpage.php?name=Financial_Assistance&sub=Billing), where you can access, download, and print information about Donalsonville Hospital's Financial Assistance Policy and the Application Form. You may also request the Financial Assistance Policy be mailed to you. To schedule an appointment with our Financial Counselor call 229-524-5217 Extension 418. You may also stop by the Business Office located on the first floor of the hospital.

- **Exclusions**

The policy only applies to emergency and medically necessary services rendered at Donalsonville Hospital. It does not apply to services rendered by independent physicians or practitioners that are not employed by Donalsonville Hospital.

- **Other**

No individual who is eligible for financial assistance will be charged more than amounts generally billed (AGB) for emergency or other medically necessary care.

- **For Non-English Speakers**

The Financial Assistance Policy, Financial Assistance Application Form, and the Plain Language Summary are also available in Spanish.

- **Financial Counselor Contact Information**

Beverly Ray – 229-524-5217 Extension 418