

# Maniilaq Health Center PLAIN LANGUAGE SUMMARY

#### POLICY: FINANCIAL ASSISTANCE POLICY FOR MANIILAQ HEALTH SERVICES

Maniilaq Health Services provides emergency and/or other medically necessary care, without discrimination, to all patients regardless of the ability to pay.

## Who is eligible for financial assistance?

Maniilaq Health Services provides financial assistance for emergency and/or other medically necessary care to all uninsured and under-insured patients whose family income falls under the below criteria:

• Uninsured or under-insured Patient whose family income is less than or equal to 200% of the Federal Poverty Guidelines adjusted for the State of Alaska.

### How much financial assistance will an eligible patient receive?

Eligible patients will receive a discount of 25%, 50%, 75%, or 100%; with the particular level of discount for which a patient is eligible determined based on the patient's family income as a percentage of the Federal Poverty Guidelines ("FPG") adjusted for the State of Alaska.

Family Income	Financial Assistance Adjustment
Less than or equal to 100% FPG adjusted for	100%* A \$5.00 Nominal fee will be assessed for
the State of Alaska	all covered services.
Between 100%-150% FPG adjusted for the	Patient owes 25% of billed services
State of Alaska	
Between 150%-175% FPG adjusted for the	Patient owes 50% of billed services
State of Alaska	
Between 176%-200% FPG adjusted for the	Patient owes 75% of billed services
State of Alaska	
Over 200% FPG adjusted for the State of Alaska	No discount of billed charges

In addition, Maniilaq Health Services will not charge patients who are eligible for financial assistance more than the "amounts generally billed" to patients who have insurance for emergency or other medically necessary care.

## What is the application process?

Maniilaq Health Services does not have presumptive eligibility. Patients may apply for financial assistance at any time by contacting (800) 478-3312 or (907) 442-3321 for Maniilaq Health Center.

#### Where is the information available?

Website: http://www.maniilag.org/resources

For assistance with financial assistance application process, please call Maniilaq Health Center Business Office at (907) 442-7139.

Copies of the Financial Assistance Policy and Financial Assistance Application may be obtained at:

Maniilaq Health Center Registration Department 436 5<sup>th</sup> Avenue Kotzebue, AK 99752 (907) 442-7139

Maniilaq Health Center Emergency Room, Registration Department 436 5<sup>th</sup> Avenue Kotzebue, AK 99752 (907) 442-5296

To obtain a free copy of the Financial Assistance Policy and Financial Assistance Policy application by mail, please call Maniilaq Health Center Registration Department at (800) 478-3312 or send a written request to P.O. Box 43, Kotzebue, AK 99752.