

Community Care Policy at Saint Vincent Health Center

At Saint Vincent Health System it is our mission to provide emergency and medically necessary treatment to all people regardless of race or creed or ability to pay. This mission is communicated to patients and their family members through signs posted in the Health Center and, wherever possible, by patient access and account representatives.

The information below may also help you determine if you and others may qualify for financial assistance under our Community Care Program.

Saint Vincent Health System is not permitted to routinely waive the portion of our charge which is the patient's responsibility, however, all patients and patient guarantors are permitted to apply for Community Care. All patients requesting Community Care participation must first complete the financial assistance screening and aid application, if applicable, to be considered for this program.

A Community Care financial evaluation application is required, along with a copy of your state assistance eligibility determination letter and other financial documentation, to verify your eligibility for the program. You can visit our main lobby Registration office or call us to discuss the program and obtain an application. Once we receive the completed application and all requested information, we will assess your qualification for this program. If you qualify for the program, all current, open accounts will be considered for a partial or full write-off and you will no longer be held liable for payment of some or all of the account balances.

Family Size	Federal Poverty Level	Community Care Income
1	\$11,490	\$28,725 - \$45,960
2	\$15,510	\$38,775 - \$62,040
3	\$19,530	\$48,825 - \$78,120
4	\$23,550	\$58,875 - \$94,200
5	\$27,570	\$68,925 - \$110,280
6	\$31,590	\$78,975 - \$126,360
7	\$35,610	\$89,025 - \$142,440
8	\$39,630	\$99,075 - \$158,520
9	\$43,650	\$109,125 - \$174,600
10	\$47,670	\$119,175 - \$190,680

If you feel that your income is at or above the guidelines listed, or you have high medical bills, you may still be eligible for a discount program. This particular program is available to most patients who do not have any insurance coverage. If you have questions, please contact us at 814-452-7623 or 866-793-1430 (toll-free) and we will be glad to advise you.

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Frequently Asked Questions

Q. What is Community Care?

- A. The Saint Vincent Health System Community Care program is designed to assist uninsured and under-insured patients who reside in Saint Vincent's primary service area and demonstrate a financial inability to pay. Some qualifications are:
- Verification of three months duration of residency is required.
 - The residency requirement may be waived with approval.
 - Community Care is not available for any elective services.

Q. What is the Community Care decision based on?

- A. The decision is based upon your yearly income, the size of your family and other factors, such as savings and investments. These factors will be compared to guidelines approved by the Saint Vincent Health Center Board of Trustees to determine eligibility for this program.

Q. What documentation is required?

- A. You will need to provide the following documentation: a tax return for the most recent year and proof of current income (such as 4-6 recent paystubs, a benefit letter from Social Security Administration or a benefit letter from the Unemployment Compensation office). Other documentation may be required based on individual circumstance.

Q. What if I exceed the income limit?

- A. Even if you exceed the income limit, paid and unpaid medical expenses related to the current course of treatment will be considered. Such bills may include doctor's office visits, testing and prescriptions.

Q. How do I apply?

- A. You may apply by calling the Saint Vincent Patient Accounting-Customer Service office weekdays (8:30 a.m. to 4 p.m.) to request a financial evaluation form for Community Care. This is the time to ask questions and discuss your concerns during the phone call. The form will be sent to your home to complete and return by mail with the required documentation. If you need assistance during the application process, financial counselors are available to help.

Q. What accounts are considered for partial or full write off?

- A. All current, open accounts due to Saint Vincent Health Center, Westfield Memorial Hospital, Saint Vincent Medical Group physicians and clinics, and Saint Vincent Consultants in Cardiovascular Diseases will be considered.

**For more information call 452-7623 or toll free 1-866-793-1430,
Monday-Friday from 8:30 a.m. to 4 p.m.**



We know how to treat people.®