

FINANCIAL ASSISTANCE PROGRAM SUMMARY

The updated Financial Assistance Program is effective 5/1/2021

Financial Assistance Applications submitted and processed on May 1, 2021 and after, are subject to the updated Financial Assistance Program, effective 5/1/2021. The updated Financial Assistance Program, applies to accounts **NOT** previously processed (currently included in a financial assistance discount).

St. Lawrence Health recognizes that there are times when patients in need of care will have difficulty paying for the services provided. St. Lawrence Health's Financial Assistance Program can help you apply for free or low-cost insurance if you qualify. In addition, St. Lawrence Health provides discounts to qualifying patients based on their income. Please contact one of our Patient Financial Advocates at 315-261-5476 for free, confidential assistance.

Q. When can I apply for assistance?

A. Patients can submit Financial Assistance Applications prior to or on the day their care is provided up until the 240th day after the first post-discharge billing statement is provided.

Q How do I apply for assistance?

A. Applications are available to download here:

[https://www.stlawrencehealthsystem.org/sites/default/files/SLH Financial Assistance Fillable Application 4-19-22.pdf](https://www.stlawrencehealthsystem.org/sites/default/files/SLH_Financial_Assistance_Fillable_Application_4-19-22.pdf) **OR** contact one our Financial Advocates at 315-261-5476 to have an application mailed to you **OR** feel free to pick up one in person at any of our local offices. Applications can be obtained from any of the three following locations, and may be returned to Canton-Potsdam Hospital.

Canton-Potsdam Hospital
Patient Financial Advocacy
50 Leroy Street
Potsdam, NY 13676
315.261.5476

Gouverneur Hospital
Patient Financial Services
77 West Barney Street
Gouverneur NY 13642
315.535.2202

Massena Hospital
Patient Financial Services
1 Hospital Drive
Massena, NY 13662
315.769.4219

Q. How is eligibility determined?

A. Patients applying for Financial Assistance may first be screened for Medicaid eligibility. If a patient appears to qualify for Medicaid, the Patient Financial Advocate, who can be reached at 315-261-5476, may assist in submitting an application for this public insurance program.

If a patient is not eligible for Medicaid or is already insured, Financial Assistance discounts may still be available. The Financial Assistance Application must be completed and submitted with documentation, including full and accurate household financial information. Please include pay stubs and/or any bank account balances.

Q. What are the income limits to qualify for discounts?

A. The amount of the discount varies based on your income and the size of your family. If you have **no health insurance**, these are the income limits based on 400% of the Federal Poverty Guidelines to qualify for discounts.

Family Size	Gross Annual Family Income	Gross Weekly Family Income
1	Up to \$51,040	Up to \$982
2	Up to \$68,960	Up to \$1,326
3	Up to \$86,880	Up to \$1,671
4	Up to \$104,800	Up to \$2,015
5	Up to \$122,720	Up to \$2,360
6	Up to \$140,640	Up to \$2,705
7	Up to \$158,560	Up to \$3,049
8	Up to \$176,480	Up to \$3,394

For those with limited health insurance coverage, discounts may also be available where income is up to 250% of the Federal Poverty Guidelines.

Q. Are there limits to eligibility based on residency?

A. Financial Assistance Discounts are available for uninsured and underinsured patients who reside in New York State. St. Lawrence Health will use discretion on a case by case basis to process financial assistance for all non-NYS resident patients.

Q. What providers and services are covered under this program?

A. This Program covers Hospital and Employed Physician services that are determined to be Medically Necessary by a Physician; including both inpatient and outpatient services. “Medically Necessary” means those services that are necessary to prevent, diagnose, or treat conditions in a person that cause acute suffering, endanger life, or result in illness or infirmity. The Financial Assistance Program does *not* cover custodial level of care inpatient services, cosmetic services, convenience items, such as television, telephone and special request private room charges, or any services billed by non-employed physicians and providers performing services in the hospital, which will be billed separately.

Q. What happens after I apply for a discount?

A. Once a completed application is received, you will be notified in writing of a decision within 30 business days. You could be notified of the following discount levels:

- 100% discount approval;
- Partial discount approval: If approved and have household income between 201-400% of the Federal Poverty Guidelines may receive a sliding scale discount: however, you will not be charged more than the average amount that the hospital would receive from Medicare (referred to as the Amount Generally Billed);
- No Discount approved: a denial is based on the information you provide. A denial will explain why you are not eligible.

Q. If I am responsible for a balance, may I make payment arrangements?

A. Payment plans may be established for patients who qualify for a partial Financial Assistance discount or who have been denied a discount. Monthly payments will be capped at 10% of gross monthly income of the patient's defined household in accordance with NYS Public Health Law 2807-k.

Q. What if I receive a bill while I am waiting to hear if I can get a discount?

A. You will not be required to pay your bill while your application for a discount is being considered. You may request reconsideration or an appeal of a Financial Assistance determination/denial if additional information is available that would change the status as outlined in the Financial Assistance eligibility guidelines.

Q. Can someone explain the discount? Can someone help me apply?

A. Yes, Free, confidential help is available. For help in English or your own language, please call any of our Patient Financial Advocates at 315-261-5476 for assistance.

Once the screening process has been completed, a representative can tell you if an application for insurance should be submitted, based on the information that you provide. If the representative finds that you don't qualify for free or low-cost insurance, they can assist you with applying for Financial Assistance Discounts. A representative can assist you with filling out the forms and can tell you what documents you will need to provide to complete your application.

Q. What if I have a problem I cannot resolve with the hospital?

A. You may call the New York State Department of Health Complaint Hotline at **1-800-804-5447**.