

PLAIN LANGUAGE SUMMARY OF FINANCIAL ASSISTANCE POLICY

Deckerville Community Hospital, Inc. is committed to providing health care services to patients who are unable to pay for such care. You may be eligible for financial assistance if you are not insured, underinsured, or do not qualify for governmental assistance such as Medicare or Medicaid. This is a summary of the DCH Financial Assistance Policy (FAP).

Financial Assistance

Eligibility for financial assistance is based on multiple factors, including insurance coverage, other sources of payment and income (Federal Poverty Level guidelines used to determine potential financial assistance offered).

Financial assistance is offered to patients who are uninsured, underinsured, as well as experiencing temporary financial hardship. Partial or full financial assistance may be granted based on a patient's ability to pay the billed charges.

Patients must comply with the application process, as well as completing the application process for all available sources of assistance, including Medicare or Medicaid Assistance.

Eligibility Requirements

Financial assistance is generally determined by reviewing the completed application and supporting documentation for the level of monetary need. If you have sufficient insurance coverage or assets available to pay for your care, you may not be eligible for financial assistance. Please refer to the full policy for a complete explanation and details.

Where to Find Information

To apply for financial assistance you may:

- Download and print the information online at www.deckervillehosp.org.
- Request the information in writing:

*Deckerville Community Hospital
Attn: Financial Assistance
3559 Pine Street
Deckerville, MI 48427*

- Visit the Patient Financial Representative office, located on the south side of the Main Lobby.
- Copies of the policy and application are also available at the Admitting Department and Business Offices, as well as all Emergency Department locations and off-site clinic locations.

Request the information by calling 810-376-7013.

How to Apply

The process involves filling out the financial assistance application and submitting it along with the supporting documents to Deckerville Community Hospital for processing. You may also apply in person by visiting the DCH Patient Financial Representative at the address listed below. Financial assistance applications are to be submitted to the following office:

*Deckerville Community Hospital
Attn: Financial Assistance
3559 Pine Street
Deckerville, MI 48427
(810) 376-7013*

No More Than Amount Generally Billed (AGB)

A patient determined to be eligible for financial assistance may not be charged more than the amount generally billed for emergency or other medically necessary care to patients who have insurance for such care.