PURPOSE:

At Asante, our mission to provide quality healthcare in a compassionate manner, valued by the communities we serve, involves much more than the treatment of illness or injury. At a time when their focus should be on healing, many people are concerned with the financial challenges of healthcare. The Asante “Financial Assistance” program offers financial support and guidance to our patients who may not have the means to pay for all of their medical expenses. By identifying affordable payment options and/or reduced fees, Asante’s Financial Assistance program allows our patients to concentrate on what is most important – their health.

SCOPE:

Composition of Asante’s Financial Assistance Program

Asante’s Financial Assistance Program is multi-faceted consisting of the following:

- Sliding scale discounts based on Federal Poverty Levels (“FPL”) up to and including free care.
- Limits on annual collections tied to household income levels
- Financial counseling, payment plans and other payment solutions.
- Referrals to Credentialed Application Counselors for assessment and assistance with enrolling in governmental assistance programs.
- Referrals to assist with enrollment in the insurance exchange.
- Discounts for those lacking insurance.

Financial Assistance Program Awareness

Asante’s goal is to widely publicize our Financial Assistance Program in a manner that is easily understandable to our patients. To do this, we offer a number of ways and formats for patients to become aware of the program. Our efforts to educate and create awareness for our Financial Assistance Program include the following:

- Asante’s Financial Assistance Program is advertised on every patient billing statement.
- Information related to our Financial Assistance Program, including our Financial Assistance Policy, is included on our website at www.asante.org
- Posters are displayed at registration areas at our hospitals (including the Emergency Room) and clinics.
- Brochures are available at registration areas at our hospitals and clinics.
- Information is provided free of charge including the Financial Assistance Policy, Financial Assistance application, the Financial Assistance Plain Language Summary, and the Asante Credit and Collections policy.
All Financial Assistance information is available in both English and Spanish versions. Financial Assistance applications are distributed by Patient Access staff, with patients contacted during and/or after their hospital encounter or clinic office visit. Resource Management staff refer patients expressing concerns about their bills to Patient Access and/or Patient Financial Services to allow them to apply for Financial Assistance.

Eligibility For Financial Assistance

Patients are eligible for Financial Assistance from Asante under the following circumstances:

- Family income is not more than 400% of the FPL.
- Services provided are medically necessary. We generally define medically necessary services as those which would be covered by the Oregon Division of Medical Assistance Programs (Oregon Medicaid). Exceptions can be made to treat life threatening illnesses such as cancer diagnoses or other high acuity services. These determinations are made on a case by case basis.
- Patient is a resident of Asante’s nine county service area, defined as Jackson, Josephine, Douglas, Klamath, Lake, Curry, Del Norte, Siskiyou or Modoc. There is no residency requirement for Emergency care.

It is important to note the following scenarios where Financial Assistance is NOT available:

- Financial Assistance will not be granted to an individual who refuses to cooperate in seeking available and affordable health care coverage.
- Financial Assistance is not granted for elective surgery or procedures.
- Financial Assistance applies to services rendered by Asante’s hospitals or Asante Physician Partner clinics. Asante Financial Assistance does not apply to independent physician/providers who may participate in your care at our hospitals. To obtain a list of local providers/practices who are not covered under Asante’s Financial Assistance Program please visit our website at www.asante.org, or ask for a copy free of charge at any Asante hospital Patient Access area, Emergency Department, or Asante Physician Partner Clinic.

Financial Assistance Determination Process

- Patients are initially assessed to determine whether they are eligible for other coverage, such as the Oregon Health Plan. Patient Access Credentialed Application Counselors screen patients to best match each patient to governmental programs they might be eligible for.
- For patients lacking insurance and not qualifying for other coverage, Financial Assistance may be provided preemptively without requiring the patient to complete paperwork. In these instances, Asante will use electronic resources to identify patients’ need for Financial Assistance. This resource will not reflect as an inquiry on the patient’s credit report. If a patients’ ability or probability of payment score is low, the encounter may be written off partially or fully to free care.
- If there is any indication that a patient will have difficulty paying their bill, a Financial Assistance application is given or sent to the patient to complete and return to Patient Financial Services to determine whether they qualify for Financial Assistance.
- Upon receipt of the Financial Assistance application, a patient’s qualifications for Financial Assistance will be reviewed by Asante personnel. When reviewing qualifications, the reviewing party considers income as total household income and accounts for circumstances including debt, family’s assets (excluding family’s primary residence, and funds held in pension or retirement plans), number of dependants, and other factors including other outstanding medical debt and catastrophic events. If applicant is an Outpatient or Emergency Room patient, asset testing will not be conducted in the process of determining eligibility for Financial Assistance.
- Once completed paperwork has been received, Asante will make a determination and communicate to the patient within 21 days whether they qualify for Financial Assistance and at what level.
- Once made, a determination of Financial Assistance eligibility remains active for medically necessary and emergent care for a six month period beginning on the date of service for which the patient was first
deemed eligible for Financial Assistance. Financial Assistance discounts will be applied to all outstanding balances during this time for all services that meet program criteria.

Determining Discounts

- Patient’s lacking insurance will receive an upfront 35% discount from their gross charges. If a patient also qualifies for Financial Assistance, they will get the higher of the uninsured discount of 35% or the discount they qualify for under our Financial Assistance Program. In other words, we will offer the patient the discount that is most beneficial to them.
- Asante will not charge patients who are eligible for Financial Assistance more than Amounts Generally Billed (AGB) to patients who have insurance coverage. Asante uses the “look-back” method to calculate AGB, which looks at paid claims for Medicare, Medicare Advantage and commercial patients over a 12 month period and determines an average discount received from our charges.
- For patients qualifying for Financial Assistance, the discount received is based on the household’s income relative to the FPL. A complete write off is provided for income levels below 250% of the FPL. For incomes above 250% up to 400% of FPL, partial discounts are offered on a sliding scale, as defined below in table A.

Table A

<table>
<thead>
<tr>
<th>Income as Percentage of Federal Poverty Guidelines</th>
<th>Percentage of discount after AGB is applied to balance</th>
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</thead>
<tbody>
<tr>
<td>0-250%</td>
<td>100%</td>
</tr>
<tr>
<td>251-300%</td>
<td>75%</td>
</tr>
<tr>
<td>301-350%</td>
<td>50%</td>
</tr>
<tr>
<td>351-400%</td>
<td>25%</td>
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</tbody>
</table>

Collection Efforts

Asante will not engage in extraordinary collection actions against individuals before reasonable efforts have been made to determine whether the patient is eligible for Financial Assistance. Nor do we allow collection agencies to do this on our behalf. Accounts are not turned to collection agencies until they are at least 121 days old. Further, Asante places restrictions on the types of collection activities collection agencies working on our behalf can engage in. For more information about Asante’s collection policy and procedures please refer to Collection Agency Protocol Policy (Asante), 400-REVINT-PFS-0002.

Payment Plans and Other Considerations

Patients will not be expected to make payments that in a given year exceed 20% of their household income. Additionally, Asante hospitals allow patients to arrange payment plans which are interest free for up to two years (24 months). Asante Physician Partners allow up to a twelve month interest free payment plan. Because of changing financial circumstances with many families, adjustment to payment plans may be requested at any time during the course of paying off the debt. On rare occasions involving extraordinary or catastrophic circumstances for a patient, Asante’s management may make limited exceptions to this policy to extend Financial Assistance.

SUBMITTED BY

<table>
<thead>
<tr>
<th>Name / Position</th>
<th>Date</th>
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</thead>
<tbody>
<tr>
<td>Gwen Bratton, Corporate Finance Executive Assistant</td>
<td>11/16/2016</td>
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## REVIEWED BY

<table>
<thead>
<tr>
<th>Name / Position</th>
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<tbody>
<tr>
<td>Tonya Richner – Patient Financial Services Manager</td>
<td>10/01/2016</td>
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<tr>
<td>Patrick Hocking, Chief Administrative and Finance Officer</td>
<td>11/16/2016</td>
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## REVISIONS

<table>
<thead>
<tr>
<th>Revision date</th>
<th>Revision Description</th>
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<tbody>
<tr>
<td>11/21/2016</td>
<td>Entire policy has been rewritten</td>
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