

Plain Language Summary of Financial Assistance Policy

St. Luke's Hospital's policy is to provide necessary medical care at a reduced rate to those patients who have documented limited resources to pay the facility's usual and customary charges as approved by the Hospital's management. Those individuals whose income is less than 120% of the slated guidelines and whose asset values fall within the set criteria would be eligible for a financial assistance allowance. The Hospital uses both an income-asset test and the federal poverty guidelines (FPG) located at http://aspe.hhs.gov/poverty to determine eligibility for financial assistance on medically emergent care claims.

Financial assistance is limited to emergency medical care and other medically necessary care. Physician or ancillary service provider charges may not be eligible for financial assistance.

Copies of the Financial Assistance Policy and application are available online at http://www.dcstlukes.org/wp-content/uploads/2015/07/Charity-Care-Policy.pdf and http://www.dcstlukes.org/financial-assistance-application-page-1/. Copies of these documents can also be requested by contacting the medical center's Business Office Manager through any of the following methods:

- Email: mandrick@dcstlukes.org
- Phone: (701) 965-6384.
- In-Person: 702 1st Street SW, Crosby, ND 58730

Copies of the Financial Assistance Policy and application can be provided to you by email, mail, or fax, depending on your preference. All copies are provided free of charge.

The Business Office Manager can answer questions and/or provide further information about the Financial Assistance policy. Completed financial assistance applications, including all required information and documentation, may be submitted to the Business Office Manager through the following methods:

- Mail "Attention: Business Office Manager", PO Box 10, Crosby, ND 58730
- In-person delivery Business Office, 702 1st Street SW, Crosby, ND 58730
- Email mandrick@dcstlukes.org
- Fax "Attention: Business Office Manager", (701) 965-4258

If you would like assistance in completing a financial assistance application, contact Marilyn Andrick, Business Office Manager.

An individual who qualifies for financial assistance will not be required to pay more for emergency medical care and other medically necessary care than the amounts generally billed to individuals who have insurance covering such care.

702-1st Street SW, P. O. Box 10 Crosby, ND 58730 701-965-6384 TTY: 1-800-366-6888