



Financial Assistance Program Summary

The physicians and staff at Meadville Medical Center are committed to providing patients, families and the community with exceptional medical care in a professional and caring environment. “Our Vision is to continually exceed the expectations of those we serve by working together as a team, dedicated to a process of never-ending improvements.”

What is Meadville Medical Center’s (MMC) Financial Assistance Program (FAP)?

The purpose of the Financial Assistance Program outlined here is to provide access to healthcare for patients without the ability to pay. In addition, the FAP offers a discount from billed gross charges for those who are able to pay a portion of the costs of their care. Meadville Medical Center will not discriminate in the determination of eligibility of the basis of race, color, creed, sex, sexual orientation, religion, age or handicap. Applications will be processed, and approval will be determined, based on specific criteria. If approved, a patient’s financial obligation to Meadville Medical Center may be reduced or eliminated for a period of time, as specified.

How do you apply for Financial Assistance?

To inquire if you may be eligible and would like an application, assistance in completing the application, or have general questions, you may contact the following:

- Contact Meadville Medical Center’s Central Business Office: 888-219-6117
- Or contact Financial Counselors - business days between 7:30am and 4:00pm at 814-333-5761
- Or go to <http://www.mmchs.org/PatientsFamilies/Payments.aspx> for a Financial Assistance Program application or to view our policy and procedure.

What are the Application Guidelines?

- You must complete an application.
- An account balance could be sent to an outside agency for collection if 1) failure to complete the application, 2) necessary information to determine eligibility is not provided, or 3) financial assistance is denied and payment plan was not established.
- Meadville Medical Center will make reasonable efforts to determine whether a patient is eligible for financial assistance before pursuing collections actions.
- No Financial Assistance Program eligible individual will be charged more for emergency or other medically necessary care than the amounts generally billed to insurance companies.
- The Financial Assistance Program will cover balances first billed 240 days prior to approval date and one year forward. After which a new application will be required.
- Meadville Medical Center may utilize external publicly available data sources which provide information on the ability to pay.
- A written notification will be sent notifying individual of eligibility decision, timeframe, and any financial obligation.
- Financial Assistance adjustments will be applied to all eligible dates of service based on the Federal Poverty Level Guidelines. All charges will be forgiven up to 300% of the Federal Poverty Level Guidelines.
- If you need assistance or help, please follow the “How Do You Apply?”

How Do You Qualify?

- You must be uninsured, underinsured, ineligible for any government healthcare insurance programs, or under financial hardship.
- The services provided must be medically necessary - examples of non-medically necessary exclusions include cosmetic procedures and hearing aids.
- All insurances to include workers compensation and auto insurances must have been billed and benefits paid to Meadville Medical Center, as well as, all insurance guidelines/plan provisions must have been followed, such as obtaining a preauthorization.
- Proof of household Income and family size is required, along with a completed application. Your eligibility must meet the financial assistance criteria based on household income and asset calculations, as compared to the Federal Poverty Level.
- The kinds of required documentation include: Social Security or Disability benefit statement, Unemployment or Pension/Annuity benefits, Wage Earnings, SSI, Individual and Business Federal Income Taxes, bank statements showing liquid assets, and any other extenuating information to show special circumstances.
- Individuals included in household size need to be a dependent on the federal tax return provided.
- Examples of liquid assets include: cash, savings and checking.
- Assets such as primary residence, rental property, and personal property such as vehicles, furniture, or livestock are not considered in determining eligibility.
- Catastrophic assistance is applicable when expenses exceed 25% of the household income.

Are there Other Pennsylvania Healthcare Coverages?

- The state of Pennsylvania offers Medicaid for those Individuals that live in Pennsylvania. Eligibility for Medicaid is based on household income, family size, age, and other factors. For more information on whether you would qualify visit the website: <https://www.compass.state.pa.us/compass.web/CMHOM.aspx>
- Pennsylvania Health Insurance Marketplace offers health plans for individuals and families. Eligibility for these plans is based on household income, family size, age, and other factors. For information about these plans visit their website: <https://www.healthinsurance.org/pennsylvania-state-health-insurance-exchange/>

Calculation Process

- Patients who are at or below the 300% guideline will receive a full write-off of charges, after approval of completed Financial Assistance Application.
- This may not be applicable to MMC-employed physicians who are obligated by Federal Medical School loans to limit Financial Assistance at 200%

