

## FINANCIAL ASSISTANCE POLICY PLAIN LANGUAGE SUMMARY

Bluestone Child and Adolescent Psychiatric Hospital is committed to providing services to persons regardless of their ability to pay.

For patients whose income is at or below (0 to 100 percent of) the <u>Federal Poverty Guidelines</u>, Bluestone provides basic, medically necessary hospital services, free of charge to Ohio residents and will be referred to a patient financial counselor or local Medicaid office to apply for Medical Assistance.

Patients, whose household income is between 100 percent of the Federal Poverty Guidelines and up to 200 percent, are eligible for a range of discounts from gross hospital charges. Discounts are based on family size and household income.

Federal Poverty Guidelines are available from the U.S. Department of Health & Human Services at its website: <a href="mailto:aspe.hhs.gov/poverty">aspe.hhs.gov/poverty</a>.

**Eligible Services:** Coverage under this Financial Assistance Policy is limited to Bluestone medical services. The Financial Assistance Policy will not provide coverage for any admissions or procedures deemed not medically necessary.

## **Requirements:**

In order to determine eligibility for and receive Financial Assistance you must provide the following:

- Complete and SIGN the Application in its entirety; Incomplete or unsigned applications will be immediately denied.
- Household Income Verification Documentation must be provided and may include the following:
  - Federal tax return with W-2s
  - Current paycheck stubs
  - Social Security or Social Security Disability statements
  - Notice of Unemployment Compensation Eligibility or Determination of Unemployment Compensation Benefits
  - Workers Compensation statement
  - Retirement statement
  - Medicaid denial letter
  - Evidence of participation in Temporary Aid to Needy Families program
  - Evidence of participation in free or reduced school lunch program
  - Other appropriate documentation

The complete Financial Assistance Policy and Application can be found at <a href="https://www.bluestone.org/ManagedFiles/PageImages/P604.00%20Financial%20Assistance%20">https://www.bluestone.org/ManagedFiles/PageImages/P604.00%20Financial%20Assistance%20</a> Policy.pdf

For assistance or questions about the Financial Assistance Policy or to request a free copy of the policy and an application form, electronically or via mail, individuals can contact Bluestone.

By phone: (216) 200-5030 In Person at: 2575 S. Belvoir Blvd.

University Heights, OH 44118

Return completed applications to: Bluestone Child and Psychiatric Hospital, Attn: Admissions Department, 2575 S. Belvoir Blvd., University Hts., OH 44118 or fax to (216) 932-3760. Applications will also be accepted via email at Intake@Bluestone.org

Eligible patients will not be charged more for Emergency or other medically necessary care than the amount generally billed.

The FAP, FAP application, and this plain language summary of the FAP are available in English and Spanish. Other languages are available upon request and use of translation services.