PLAIN LANGUAGE SUMMARY OF FINANCIAL ASSISTANCE POLICY

Effective 2/1/2024



Regional Medical Center (RMC) offers financial assistance to persons who need emergency or other medically necessary healthcare. Financial Assistance Application and policy are available on our website at regmedctr.org/FAP in English and Spanish.

Eligibility Requirements

No one will be denied access to services due to inability to pay; and there is a discounted / sliding fee schedule available based on family size and income to determine if you qualify for assistance.

- If household income is ≤ 150% of the Federal Poverty Income Guideline (FPIG), you will not have to pay your hospital bill.
- If household income is between 150-300% of the FPIG will not pay more than the amounts generally billed to individuals who have insurance, and may be eligible for additional discounts.
- If household income is <100% of FPG offers a full discount (or nominal fee) to all individuals and families
- A nominal charge based solely on family size and income for all individuals and families with income >100% and <200% of FPG

Discount %	100% (100% FPIG)	100% (150% FPIG)	75% (200% FPIG)	50% (250% FPIG)	25% (300% FPIG)
Family Size	Maximum Income	Maximum Income	Maximum Income	Maximum Income	Maximum Income
1	\$15,060	\$22,590	\$30,120	\$37,650	\$45,180
2	\$20,440	\$30,660	\$40,880	\$51,100	\$61,320
3	\$25,820	\$38,730	\$51,640	\$64,550	\$77,460
4	\$31,200	\$46,800	\$62,400	\$78,000	\$93,600
5	\$36,580	\$54,870	\$73,160	\$91,450	\$109,740
6	\$41,960	\$62,940	\$83,920	\$104,900	\$125,880
7	\$47,340	\$71,010	\$94,680	\$118,350	\$142,020
8	\$52,720	\$79,080	\$105,440	\$131,800	\$158,160
Additional	\$5,380	\$8,070	\$10,760	\$13,450	\$16,140

Qualifying Services

Elective cases must be reviewed prior to receiving the service to ensure it meets qualification.

- Qualifying services include emergency or other medically necessary health services billed by RMC, Regional Family Health, Home Care.
- · Cosmetic surgery is not covered

Questions

Visit regmedctr.org, call 563-927-7405, or stop by the Billing Department on Level 2 of RMC.

Send completed application and required documents (see application) to:

Regional Medical Center FAP Clerk PO Box 359 Manchester, Iowa 52057

Form #1964 (11/2024) 1 of 1