

Reduce Fee/Free Care Policy

Appendix B

Patient Reduced Fee/Free Care Guidelines. Services eligible under this Policy will be made available to the patient on a sliding fee scale, in accordance with financial need, as determined in reference to Federal Poverty Levels (FPL), outlined in the Federal Poverty Guidelines, in effect at the time of the determination, as follows:

- Patients whose family income is at or below 140% of the FPL are eligible to receive Free Care;
- Patients whose family income is above 140% but not more than 300% of the FPL are eligible to receive services at a Reduced Rate based on a Sliding Fee Schedule.
- Patients whose family income exceeds 300% of the FPL may be eligible to receive discounted rates on a case-by-case basis based on their specific circumstances, such as catastrophic illness or medical indigence, at the discretion of Grace Cottage.

Financial Assistance Guidelines

Effective 01/19/2017-02/01/2018

Based on 2017 Poverty duratimes for the 48 contiguous states and the District of Columbia							
		\leq 140% of	141% - 180% of	181% - 220% of	221% - 260% of	261% - 300% of	> 300% of
Federal		Poverty Level	Poverty Level	Poverty Level	Poverty Level	Poverty Level	Poverty Level
Poverty	Family	Patient Pays 0%	Patient pays 20%	Patient pays 40%	Patient pays 60%	Patient pays 80%	Patient pays 100%
Guideline	Size	Earnings up to:	Earnings up to:	Earnings up to:	Earnings up to:	Earnings up to:	Earnings at/above:
\$12,060.00	1	\$16,884.00	\$21,708.00	\$26,532.00	\$31,356.00	\$36,180.00	\$36,181.00
\$16,240.00	2	\$22,736.00	\$29,232.00	\$35,728.00	\$42,224.00	\$48,720.00	\$48,721.00
\$20,420.00	3	\$28,588.00	\$36,756.00	\$44,924.00	\$53,092.00	\$61,260.00	\$61,261.00
\$24,600.00	4	\$34,440.00	\$44,280.00	\$54,120.00	\$63,960.00	\$73,800.00	\$73,801.00
\$28,780.00	5	\$40,292.00	\$51,804.00	\$63,316.00	\$74,828.00	\$86,340.00	\$86,341.00
\$32,960.00	6	\$46,144.00	\$59,328.00	\$72,512.00	\$85,696.00	\$98,880.00	\$98,881.00
\$37,140.00	7	\$51,996.00	\$66,852.00	\$81,708.00	\$96,564.00	\$111,420.00	\$111,421.00
\$41,320.00	8	\$57,848.00	\$74,376.00	\$90,904.00	\$107,432.00	\$123,960.00	\$123,961.00

2017 Grace Cottage Hospital Sliding Fee Scale

Based on 2017 Poverty Guidelines for the 48 Contiguous States and the District of Columbia

2017 Federal Poverty Guideline increases by \$4180 for each family member