

## PLAIN LANGUAGE SUMMARY

River Valley Behavioral Health Hospital (RVBHH) offers financial assistance to patients with no health insurance, or those who have out of pocket responsibilities that they cannot afford even after insurance has paid for a portion of their care. Patients must submit an application for financial assistance and all required supporting documentation, demonstrating financial need and must otherwise comply with the requirements of the Financial Assistance Policy.

The Financial Assistance Program application, policy, and Plain Language Summary may be found on River Valley Behavioral Health website. Alternatively, printed copies of the Financial Assistance Policy, the Plain Language Summary, or the application form can be obtained for free by visiting or calling the Patient Financial Service Office. You may contact the Patient Financial Services to discuss any questions you might have. If additional documents are needed, we will contact you by phone or mail to let you know what else is required.

If you are uninsured you will generally qualify for free Emergency and other Medically Necessary Care under RVBH's Financial Assistance Program (1) if you have annual household income equal to or less than 225% of the Federal Poverty Level, (2) lack any other assets to pay for your charges and (3) if requested to do so by RVBHH, you apply for Medicaid or other state or Federal programs and fully cooperate in the application and determination process.

If you are uninsured or have a balance remaining after insurance, you will generally qualify for discounted Emergency and other Medically Necessary Care under RVBHH's Financial Assistance Program (1) if you have household income of up to 375% of the Federal Poverty Level, (2) lack any other assets to pay for the amounts for which become personally responsible for paying and (3) if requested to do so by RVBHH, apply for Medicaid or other state or Federal programs and fully cooperate in the application and determination process.

If RVBHH determines that you are eligible for financial assistance, you will not be personally responsible for paying more than the amount we generally bill patients have insurance coverage for the same care. In addition, you will never be required to make advance payments or other payment arrangements to receive emergency services. However, you may be required in most situations to make a substantial advance deposit or agree to other payment arrangements before receiving non-emergency services.

Free copies of this summary, the Financial Assistance Policy, the Billing and Collections Policy, and the Financial Assistance Program application are available on RVBH's website at <http://www.rivervalleyandaffiliates.com/>. Copies are also available at the Finance Department, located at the Cigar Factory Complex, 1100 Walnut St. Owensboro KY 42301. This information is also available by mail by contacting RVBHH Finance Department at (270) 689-6500.

RVBHH's Patient Financial Representative staff is available to answer questions and provide information about the Financial Assistance Program and assistance with the application process. Our Patient Financial Representative staff is located in the Administrative Offices, located at the Cigar Factory Complex, 1100 Walnut St. Owensboro KY 42301. They can also be reached by phone at (270) 689-6500.