



SOUTH CENTRAL REGIONAL MEDICAL CENTER

Plain Language Summary of South Central Regional Medical Center's Financial Assistance Policy

South Central Regional Medical Center's Financial Assistance Policy explains the eligibility standards and mechanisms for determining discounts for those patients seeking financial assistance for emergency or hospital-based medically necessary care.

Eligibility and discounts are determined in accordance with the current Federal Poverty Income Guidelines and the individual's annual family income. Discounts given apply toward medical care that has already been provided at the time the patient's application is submitted. Patients eligible under the Financial Assistance Policy will never be charged more than the Amounts Generally Billed for patients with insurance, using the look-back method. Applicants must be willing to apply for any and all assistance resources recommended by the hospital and to accept assistance from these resources. Applicants must complete and provide all required paperwork to have their application considered. Assistance with the application is available by contacting the Patient Accounts Department at (601) 399-6103 or (601) 399-6104. If the application is returned incomplete, it will be denied. Required paperwork will include information such as pay stubs, bank statements, tax returns and property taxes, disability letter, Social Security/Retirement/Child Support/other income, utility and property expenses, and denial letters for Medicaid.

Individuals may obtain a copy of the Financial Assistance Policy and application at www.scrmc.com or may pick up a copy at South Central Regional Medical Center (1220 Jefferson Street, Laurel, MS 39440) in the **Emergency Department** or **Admissions Department** or at South Central Place (2260 Hwy. 15 North, Laurel, MS 39440) in the **Patient Accounts Department**. Individuals may also request that a copy of the Financial Assistance Policy and application be mailed to them, free of charge, by calling **(601) 399-6103** or **(601) 399-6104**. Our website (www.scrmc.com) includes a list of health care providers who participate in this Financial Assistance Policy as well as those who are excluded.

Completed applications must be submitted within **240** days of the patient's first post-discharge billing statement for the medical treatment for which the patient is seeking financial assistance. The completed application and documents may be mailed to **SCRMC, Attention: Patient Accounts, Post Office Box 607, Laurel, MS 39441** or may be returned in person at South Central Place, Patient Accounts Department, or at South Central Regional Medical Center, Admissions Department. A decision regarding the application will be mailed to the patient.

SCRMC will make reasonable efforts to determine if a patient is eligible under the Financial Assistance Policy before beginning the collection process. We will not pursue collection activities beyond phone calls and billing statements for those who have submitted FAP applications until a decision has been made on the application.

Spanish translations of this Plain Language Summary and other Financial Assistance Policy documents are available on our website at www.scrmc.com and in the Emergency Department and Admissions Department at SCRMC and in the Patient Accounts Department at South Central Place.