

Financial Assistance Policy and Financial Assistance Policy (Charity Care/Kid Care/Medicaid) – Plain Language Summary

The HackensackUMC Mountainside Financial Assistance Policy and Financial Assistance Policy (Charity Care/Kid Care/Medicaid) (hereinafter, together, “FAP”) exists to provide eligible patients partially or fully-discounted emergency or other medically necessary healthcare services provided by HackensackUMC Mountainside. Patients seeking Financial Assistance must apply for the program, which is summarized herein.

Eligible Services- Emergency or other medically necessary healthcare services provided by HackensackUMC Mountainside and billed by HackensackUMC Mountainside. The FAP only applies to services billed by HackensackUMC Mountainside. Other services which are separately billed by other providers, such as physicians or laboratories, are not eligible under the FAP.

Eligible Patients- Patients receiving eligible services, who submit a complete Financial Assistance Application (including related documentation/information), and who are determined eligible for Financial Assistance by HackensackUMC Mountainside.

How do I apply?- FAP and related Application Form may be obtained/completed/submitted as follows:

View information on the Medical Center Website: An individual can view information about financial assistance online at the following website:
<http://www.mountainsidehosp.com/>

Application- An individual can apply for financial assistance by filling out a paper copy of the application. The paper application is available free of charge by any of the following methods:

By Mail: By writing to the following address and requesting a paper copy of the financial assistance application:

1 Bay Avenue
Montclair, NJ 07042

In Person: By stopping by the Financial Assistance Department in person (Monday thru Friday, 9:00AM-5:00 PM), located at the following address:

1 Bay Avenue
Montclair, NJ 07042

By Phone: The Financial Assistance Department can be reached at (973)-429-6000, Ext. 5910.

Available Languages- The Financial Assistance Policy, application, and plain language summary are available in the primary language of any populations with limited proficiency in English (“LEP”) that constitute the lesser of five (5%) percent or 1,000 individuals within the primary service area served by the Medical Center.

Completed applications can be sent to the Financial Assistance Department at 1 Bay Avenue Montclair, NJ 07042.

Determination of Financial Assistance Eligibility- Generally, Eligible Persons are eligible for Financial Assistance, using a sliding scale, when their Family Income is at or below 500% of the Federal Government’s Federal Poverty Guidelines (FPG). Eligibility for Financial Assistance

means that Eligible Persons will have their care covered fully or partially, and they will not be billed more than "Amounts Generally Billed" (AGB) to insured persons (AGB, as defined in IRC Section 501(r) by the Internal Revenue Service). Financial Assistance levels, based solely on Family Income and FPG, are determined if income is up to 500% of FPG.

Note- Other criteria beyond FPG are also considered (e.g., availability of cash or other assets that may be converted to cash, and excess monthly net income relative to monthly household expenditures), which may result in exceptions to the preceding. If no Family Income is reported, information will be required as to how daily needs are met. HackensackUMC Mountainside's Financial Assistance Department reviews submitted applications which are complete, and determines Financial Assistance Eligibility in accordance with HackensackUMC Mountainside's Financial Assistance Policy. Incomplete applications are not considered, but applicants are notified and given an opportunity to furnish the missing documentation/information.

For help, assistance, or questions, please visit or call the Financial Assistance Department in person (Monday thru Friday, 9:00AM-5:00 PM), located at: 1 Bay Avenue Montclair, NJ 07042, or call (973)-429-6000 Ext 5910.