What should I do first?
Please contact us if you need assistance in paying for your medical bill, there are several financial assistance programs available that we can assist with. Please call 518.243.1695 or 1.877.456.4557

What is Financial Assistance?
Financial Assistance is a program that can reduce or eliminate your Ellis Medicine bill and is based on an approval process. How much it is reduced/eliminated is based on established guidelines that include: income level, medical situation, and other indicators of inability to pay. To learn more or apply please ask to speak to a Financial Advocate.

Financial assistance program(s) you may be eligible for:
- Medical Insurance Assistance Program
- Medicaid
- Essential Health Plan
- Financial Assistance  [Financial Assistance Application]
- Marketplace Exchange Plan
- Prompt Pay Discount

Who qualifies for financial assistance?
Financial Assistance is available for patients with limited incomes and who are uninsured or underinsured.

Everyone who needs emergency services will receive care. Financial assistance is available for residents of New York State who meet the income limits and/or other criteria as defined in the Financial Assistance Policy

Everyone who can provide documentation of NY State residence can receive financial assistance for non-emergency, medically necessary services at Ellis Medicine if they meet the income limits.

To determine your eligibility for Financial Assistance you must complete a Financial Assistance Application. It is important for you to know that you cannot be denied medically-necessary care because you need financial assistance.

Regardless of immigration status, if you reside in NY State, you can apply for financial assistance.

What are the income limits for Financial Assistance?
We use the most current annual Federal Poverty Level (FPL) scale which is updated annually when published (typically in the month of Feb) to determine where your family size and income place you.
### 2018 FPL Scale

<table>
<thead>
<tr>
<th>Household/Family Size</th>
<th>100%</th>
<th>150%</th>
<th>200%</th>
<th>250%</th>
<th>300%</th>
<th>400%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$12,140</td>
<td>18,210</td>
<td>24,280</td>
<td>30,350</td>
<td>36,420</td>
<td>48,560</td>
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<tr>
<td>2</td>
<td>$16,460</td>
<td>24,690</td>
<td>32,920</td>
<td>41,150</td>
<td>49,380</td>
<td>65,840</td>
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<tr>
<td>3</td>
<td>$20,780</td>
<td>31,170</td>
<td>41,560</td>
<td>51,950</td>
<td>62,340</td>
<td>83,120</td>
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<tr>
<td>4</td>
<td>$25,100</td>
<td>37,650</td>
<td>50,200</td>
<td>62,750</td>
<td>75,300</td>
<td>100,400</td>
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<tr>
<td>5</td>
<td>$29,420</td>
<td>44,130</td>
<td>58,840</td>
<td>73,550</td>
<td>88,260</td>
<td>117,680</td>
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<tr>
<td>6</td>
<td>$33,740</td>
<td>50,610</td>
<td>67,480</td>
<td>84,350</td>
<td>101,220</td>
<td>134,960</td>
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<tr>
<td>7</td>
<td>$38,060</td>
<td>57,090</td>
<td>76,120</td>
<td>95,150</td>
<td>114,180</td>
<td>152,240</td>
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<tr>
<td>8</td>
<td>$42,380</td>
<td>63,570</td>
<td>84,760</td>
<td>105,950</td>
<td>127,140</td>
<td>169,520</td>
</tr>
<tr>
<td>9</td>
<td>$46,700</td>
<td>70,050</td>
<td>93,400</td>
<td>116,750</td>
<td>140,100</td>
<td>186,800</td>
</tr>
<tr>
<td>10</td>
<td>$51,020</td>
<td>76,530</td>
<td>102,040</td>
<td>127,550</td>
<td>153,060</td>
<td>204,080</td>
</tr>
<tr>
<td>11</td>
<td>$55,340</td>
<td>83,010</td>
<td>110,680</td>
<td>138,350</td>
<td>166,020</td>
<td>221,360</td>
</tr>
<tr>
<td>12</td>
<td>$59,660</td>
<td>89,490</td>
<td>119,320</td>
<td>149,150</td>
<td>178,980</td>
<td>238,640</td>
</tr>
<tr>
<td>13</td>
<td>$63,980</td>
<td>95,970</td>
<td>127,960</td>
<td>159,950</td>
<td>191,940</td>
<td>255,920</td>
</tr>
<tr>
<td>14</td>
<td>$68,300</td>
<td>102,450</td>
<td>136,600</td>
<td>170,750</td>
<td>204,900</td>
<td>273,200</td>
</tr>
</tbody>
</table>

### Financial Assistance Income Tiers

<table>
<thead>
<tr>
<th>Income Tier</th>
<th>% of FPL</th>
<th>Financial Assistance Rate</th>
<th>Dental Award (highest vol. payer rates)</th>
<th>Financial Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>0-300%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>4</td>
<td>0-200%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

**What if I do not meet the income limits for Financial Assistance?**

If you cannot pay your bill, Ellis Medicine can work with you to set-up a payment plan or assist in identifying alternative financial assistance programs. Please call **518.243.1500** or **1.877.456.4557** to speak with a Customer Service representative.

**What information do I need to apply for Financial Assistance?**

- Picture ID
- A bill indicating his/her address
- (4) Pay stub’s
- If you cannot provide any of these, you may still be able to apply for financial assistance.

**How do I apply for the Ellis Medicine Financial Assistance Program?**


January 2018
Call our Financial Advocates at 518.243.1695, or visit the Financial Advocate office at Ellis Hospital in the Admitting/Patient Registration area, Monday through Friday during normal business hours. Someone can assist you with the Application, information needed or any questions you may have.

- If you do not speak English, someone will help you in your own language.

**How does the process work?**

Return your completed application form and necessary documents to an Ellis Financial Advocate or mail to:

Ellis Medicine  
Patient Financial Services – Mail Code 1935  
ATTN: Financial Assistance  
1101 Nott Street  
Schenectady, NY 12308

Once your application is reviewed, you will be notified of three possible results:

- We need more information from you to complete your application.
- Financial Assistance was approved at one of the tiers.
- You did not qualify for Financial Assistance.

If you are denied Financial Assistance, you can appeal by submitting a letter to the hospital Patient Services Financial Director explaining why the determination should be reconsidered. Please include any additional and appropriate supporting documents at this time.

Such letters can be mailed to:

Ellis Medicine  
Patient Financial Services – Mail Code 1935  
ATTN: Financial Assistance  
1101 Nott Street  
Schenectady, NY 12308

**What services are covered?**

- All medically necessary services provided by Ellis Medicine are covered by financial assistance. This includes outpatient services, emergency care and inpatient admissions.
- The Financial Assistance Program does not honor any applications for admission(s) to our Skilled Nursing Facility and non-emergent elective services, such as cosmetic or dental procedure and, some bariatric procedures.
- Charges from *private doctors* that Ellis Medicine does not bill for who provide services in the hospital are not covered. A list of these provides can be found on our website. You should talk with your private doctor(s) to see if they offer a discount or payment plan.

January 2018
Services Not Billed by Hospital
During your hospital stay, you may receive treatment from providers who will bill separately for their services. We will give your insurance information to these providers. Please contact these providers directly with any questions about your bill. Examples of separately billed services: your physicians/surgeon, other consulting physician fees, emergency department physicians, radiologists, anesthesiologists, pathologist, cardiologist, neurologist. You should talk to private doctors to see if they offer a discount or payment plan.

What is the Average Out-of-Pocket Cost for Someone Without Insurance?
Costs will vary depending on the health care service rendered and the setting in which the care is delivered (e.g., hospital, doctor’s office). For example, the average out-of-pocket for an uninsured patient for a visit to the emergency room vs. a doctor’s office is generally as follows:

- The grid below states the expected payment at the time of service and will be applied to your account as a partial payment on services received.

<table>
<thead>
<tr>
<th>Service</th>
<th>Self-Pay Expected</th>
</tr>
</thead>
<tbody>
<tr>
<td>ED Technical/Professional</td>
<td>$250.00 per Visit as initial down payment and billed for remaining balance. A prompt pay discount equal to 50% may be requested and applied if payment in full is received prior to transfer of account to Bad Debt OR payment arrangement set up and in good standing prior to transfer of account to Bad Debt. PPD is not applied to copay, deductible, coinsurance amounts.</td>
</tr>
<tr>
<td>Emergent Technical/Professional</td>
<td>$150.00 per Visit as initial down payment and billed for remaining balance. A prompt pay discount equal to 50% may be requested and applied if payment in full is received prior to transfer of account to Bad Debt OR payment arrangement set up and in good standing prior to transfer of account to Bad Debt. PPD is not applied to copay, deductible, coinsurance amounts.</td>
</tr>
<tr>
<td>Outpatient/Inpatient</td>
<td>A prompt pay discount equal to 50% may be requested and applied if payment in full is received prior to transfer of account to Bad Debt OR payment arrangement set up and in good standing prior to transfer of account to Bad Debt. PPD is not applied to copay, deductible, coinsurance amounts.</td>
</tr>
<tr>
<td>Clinic / Professional</td>
<td>A prompt pay discount equal to 50% may be requested and applied if payment in full is received prior to transfer of account to Bad Debt OR payment arrangement set up and in good standing prior to transfer of account to Bad Debt. PPD is not applied to copay, deductible, coinsurance amounts.</td>
</tr>
</tbody>
</table>