



Financial Assistance Policy – Plain Language Summary Advanced Care Hospital of White County – Searcy, AR

Financial Assistance Offered

Advanced Care Hospital of White County offers financial assistance through its Financial Assistance Policy to patients unable to pay for medically necessary care.

Eligibility Requirements and Assistance Offered

Eligibility for financial assistance is based on multiple factors, including the nature of the condition and care required, insurance coverage or other sources of payment (including personal injury claims), income (Federal Poverty Level guidelines used to determine the amount of financial assistance offered), family size, assets, and any special consideration the patient or physician would like to have considered.

Financial assistance is offered to patients who are uninsured and underinsured. Partial or full financial assistance will be granted based on a patient's ability to pay the billed charges.

Patients must fully comply with the application process, including submitting tax returns, bank statements and pay stubs, as well as completing the application process for all available resources of assistance, including Medicaid or Medical Assistance.

How to Apply for Assistance

The patient or any person involved in the care of the patient, including a family member or provider, can express financial concerns at any point during the patient's care. The patient or responsible party will then be encouraged to complete a financial assistance application.

Financial assistance is limited to medical care provided at the Advanced Care Hospital of White County and by ACHWC medical personnel. Expenses such as travel, food, lodging, durable medical equipment, and prescriptions are not covered under the Financial Assistance Policy. ACHWC will uphold the confidentiality and dignity of each patient, and any information submitted for consideration of financial assistance will be treated as protected health information under the Health Insurance Portability and Accountability Act (HIPAA).

Where to Obtain Copies

Copies of the Financial Assistance Policy, this plain language summary, the Financial Assistance Application and associated instructions are available free of charge upon request by writing to Advanced Care Hospital of White County, 1200 South Main, Searcy, AR 72143. Copies may also be obtained upon admission. These documents are available online at <https://www.unity-health.org/advanced-care-hospital/pricing-and-financial-information/>.

Contact for Information and Assistance

Additional information about the Financial Assistance Policy and assistance with the application process, as well as the application in Spanish, can be obtained from Patient Account Services by calling 501-278-3487.

For Non-English Speakers

Translations to Spanish of the Financial Assistance Policy Application and the plain language summary are available upon request from Patient Account Services/Social Worker by calling 501-278-3487.

No More Than Amount Generally Billed (AGB)

A patient determined to be eligible for financial assistance may not be charged more than amounts generally billed for emergency or other medically necessary care to patients who have insurance for such care.