Financial Assistance Plain Language Summary

Thank you for selecting T.J. Regional Health for your recent services. As part of our mission and commitment to the community, T.J. Regional Health provides financial assistance to patients who qualify for assistance pursuant to our Charity and Financial Assistance Policy.

ELIGIBILITY REQUIREMENTS:

In order to be eligible for financial assistance for medically necessary health care services, the patient must qualify for assistance under T.J. Regional Health’s Charity and Financial Assistance Policy. The Federal Poverty Guidelines will be used as the basis for determining whether a person or family is Medically Eligible.

The necessity for medical treatment of any patient will be based on the clinical judgment of the health care provider without regard to the financial status of the patient. All patients will be treated for emergency medical conditions regardless of ability to pay or to qualify for financial assistance, in accordance with federal and state law.

HOW TO APPLY FOR FINANCIAL ASSISTANCE:

Free copies of the Financial Assistance Policy and the Financial Assistance Application can be obtained through these sources:

• In person at any of our Patient Access/Registration Departments, Financial Counseling Department, or Billing Department

• Over the phone at 270-659-5875 or 270-384-4753 ext.100

• Online through our T.J. website (www.tjsamson.org)

• By mail: T.J. Regional Health, Attn: Financial Assistance Dept.

 1301 North Race Street

 Glasgow, KY 42141

THE APPLICATION PROCESS:

During the application process you will be asked to provide information regarding the number of people in your family, your monthly income, and other information that will assist the hospital with determining your eligibility for Financial Assistance. You may be asked to provide a pay stub, bank statement, or tax records to assist us with verifying your income. The patient’s situation will be evaluated according to relevant circumstances, such as income, assets, or other resources available to patient or patient’s family and the outstanding balance.

After submitting the application, the hospital will review the information and notify you in writing regarding your eligibility. If you have any questions during the application process, you may contact the Patient Financial Services office at 270-659-5875 or 270-384-4753 ext.100.