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Standards & Regulations:
Tags: *Policy*
Applicability: *Munson Healthcare Systemwide*

Financial Assistance, 003.003

Purpose

To provide a consistent method of determining eligibility in the Financial Assistance Program (FAP) for all Munson Healthcare facilities, to include Munson Medical Center, Munson Healthcare Paul Oliver Memorial Hospital, Kalkaska Memorial Health Center, Munson Healthcare Cadillac Hospital, Munson Healthcare Grayling Hospital, Munson Healthcare Charlevoix Hospital, Munson Healthcare Otsego Memorial Hospital and Munson Healthcare Manistee Hospital. See Addendum A at the end of this policy, (Physician Practices Who Do or Do Not Follow MHC's Financial Assistance Policy).

To implement this policy, Munson Healthcare intends to, and shall, comply with Internal Revenue Code section 501(r), Public Act 107, and all other federal, state, and local laws, rules and regulations that may apply to activities conducted pursuant to this policy.

To communicate the availability of financial assistance to patients and the public for those who qualify under the MHC Financial Assistance Policy.

Background

MHC will not deny appropriate care to any individual requiring treatment or prevention of an illness that is deemed emergent or medically necessary.

MHC is committed to providing financial assistance to persons who have healthcare needs and are uninsured/underinsured or ineligible for a government program, in whole or in part, for medically necessary care based on a determination of their individual financial situation in accordance with this policy.

Financial assistance is not considered to be a substitute for personal responsibility. The facility will pursue payment from the patient/gaurantor for all deductibles, co-pays, co-insurance and/or service not covered by insurance or other thire-party payors. Patients are expected to cooperate with Munson Healthcare's procedures for obtaining financial assistance or other forms of payment, and are expected to contribute to the cost of their care based on their individual ability to pay.

The granting of financial assistance shall be based on an individualized determination of financial need, and shall not take into account age, gender, race, social or immigrant status, sexual orientation, religious affiliation, or any other protected class.

Financial assistance under this policy is intended to assist uninsured/underinsured individuals and shall not be granted to any third party payors, including but not limited to auto insurance plans, workers compensation plans, commercial insurance plans or government insurance plans.

The determination to grant financial assistance under this policy is solely at the discretion of MHC.

The Financial Assistance Policy will be reviewed per the renewal schedule by a "delegated body" of the hospital's Board. The Chief Financial Officer is a delegated body of the Board. He/she will review the policy annually and report any changes to the Finance Committee of the Board. The approval of the policy will be noted in the minutes of the Finance Committee meeting.

A Financial Assistance application that is complete and approved by any MHC facility will be accepted at any of the MHC facilities covered under this policy

Definitions

For the purpose of this policy, the terms below are defined as follows:

1. **501r Rule:** Regulations that provide guidance regarding the requirements for charitable hospital organizations added by the Patient Protection and Affordable Care Act of 2010.
2. **Charges:** Term referring to the gross amount the patient or insurance is expected to pay.
3. **Financial Assistance:** Healthcare services that have or will be provided without charge or at a discount to individuals who meet the criteria established in this policy.
4. **FAP:** Financial Assistance Policy.
5. **Munson Healthcare (MHC):** This includes Munson Medical Center, MHC Paul Oliver Memorial Hospital, Kalkaska Memorial Health Center, MHC Charlevoix Hospital, MHC Cadillac Hospital, MHC Otsego Memorial Hospital, and MHC Grayling Hospital.
6. **Family:** Patient, patient's spouse (if patient files tax returns as Married Filing Jointly) and all of patient's dependents, as claimed on responsible party's tax return.
7. **Family Income:** Income is calculated using a family's Modified Adjusted Gross Income (MAGI), along with current income verifications. If anyone in the family is self-employed, the following business deductions will be added to MAGI: depletion, depreciation and travel, meals and entertainment. These deductions will not be allowed in determining income. Business expenses listed as "other" will be evaluated on an individual basis.
8. **Uninsured:** The patient has no level of insurance or third party assistance to assist with meeting his/her payment obligations.
9. **Underinsured:** Not having insurance that offers complete financial protection that results in the patient/guarantors lack of ability to cover out-of-pocket expenses.
10. **Federal Poverty Level (FPL):** The set minimum amount of gross income that a family needs for food, clothing, transportation, shelter and other necessities. In the United States, this level is determined by the Department of Health and Human Services.
11. **Medically Necessary Care:** According to Medicare.gov, 'medically necessary' is defined as "health-care services or supplies needed to prevent, diagnose, or treat an illness, injury, condition, disease, or its symptoms and that meet accepted standards of medicine".
12. **Application Period:** The period during which MHC must accept and process an application for financial

assistance under the FAP. The application period begins on the date the care is provided and ends on the 240th day after MHC provides the first discharge billing statement.

13. **Extraordinary Collection Actions (ECA):** ECA's include: Selling a debt to another party; reporting adverse information about the individual to consumer credit reporting agencies or credit bureaus; deferring or denying, or requiring payment before providing medically necessary care, because of an individual nonpayment of one or more bills for medically necessary care previously provided (outstanding balances); actions that require a legal or judicial process such as liens of civil actions.
14. **Plain Language Summary:** A summary of the Financial Assistance Policy that is written in simple terms to make it clear and understandable by the general public as required by IRS 501r.
15. **EMTALA:** Emergency Medical Treatment and Active Labor Act.
16. **Look Back Method:** A method in which a hospital facility computes at least annually a percentage discount to apply against the hospital facility's gross charges for care provided to FAP-eligible individuals.

Policy

Commitment to Providing Emergency Medical Care

- A. MHC provides, without discrimination, care for emergency medical conditions to individuals regardless of their ability to pay or eligibility for financial assistance. MHC hospitals will not engage in actions that discourage individuals from seeking emergency medical care. Emergent care will be provided without interference from debt collection or demands for prepayment of services prior to treatment. All MHC hospitals fully comply with EMTALA.

Services Eligible under this Policy

- A. Emergency medical services provided by a Munson Healthcare facility.
- B. Services for a condition, which, if not promptly treated, would lead to an adverse change in the health status of an individual;
- C. Non-elective services provided in response to life-threatening circumstances in a non-emergency room setting; and
- D. Medically necessary services, evaluated on a case-by case basis, at Munson Healthcare's discretion.

Services Not Eligible under this Policy

- A. The following healthcare services are not eligible for financial assistance:
 1. Non-medically necessary services of any kind including but not limited to sterilization reversals, infertility treatment, breast augmentation, and/or any cosmetic procedures
 2. Outpatient pharmacy services, except for initial ED visit.
 3. Procedures that are determined to be experimental in nature by the FDA
 4. Other items or procedures not normally covered by insurance.

Provider List

- A. Addendum A lists physician practices that provide emergency or other medically necessary care at a MHC facility and indicates which practices are covered under this Financial Assistance Policy. See

Addendum A at the end of this policy (Physician Practices Who Do or Do Not Follow MHC's Financial Assistance Policy).

Financial Assistance Eligibility Criteria

- A. Prior to seeking financial assistance, the patient and MHC will pursue all possible forms of third party payment. MHC reserves the right to investigate, verify, and request assignment of:
1. All benefits from any third party insurance source
 2. All benefits from State and Federal assistance programs for which the individual may be eligible (e.g. Medicaid)
 3. All benefits from any outside financial assistance program
 4. Pending litigation

- B. Services eligible under this policy will be made available to the patient on a sliding fee scale, in accordance with need. Uninsured/Underinsured patients whose family income meets the following criteria will be eligible for a discount on gross charges as follows:

Up to 200% of the FPL:	100% discount on gross charges
Between 201% and 300% of the FPL:	75% discount on gross charges
Between 301% and 400% of the FPL:	65% discount on gross charges

- C. Presumptive Financial Assistance Eligibility: There are instances when a patient may appear eligible for financial assistance discounts, but there is no financial assistance application on file due to a lack of supporting documentation. Often there is adequate information provided by the patient or through other sources, which could provide sufficient evidence to provide the patient with financial assistance. In the event there is no evidence to support a patient's eligibility for financial assistance, MHC, in its sole discretion, may use information provided by outside agencies in determining estimate income amounts for the basis of determining financial assistance eligibility for potential discount amounts. Presumptive eligibility may be determined on the basis of individual life circumstances. See Addendum B at the end of this policy, (Presumptive Eligibility Determination).
- D. COBRA Payments: When a patient has services at MHC and it is determined that the patient is eligible for COBRA and cannot purchase COBRA themselves, MHC, in its sole discretion, may elect to purchase the COBRA coverage for them. COBRA will be purchased for patients whose family income is up to 250% FPL and the benefit outweighs the costs of the assistance. Need for continuation of COBRA coverage will be evaluated monthly.
- E. The applicant will be expected to cooperate and assist with all applications for benefits from federal, state or other charitable sources. Based on extenuating circumstances, the need for all of the supporting documentation may be waived at the discretion of an MHC financial director.
- F. It is expected that a patient who may be Medicaid eligible apply for Medicaid (See Addendum C for exceptions). In order to receive financial assistance, the patient must apply for Medicaid and be denied for any reason other than the following:
1. Did not apply;
 2. Did not follow through with the application process;
 3. Did not provide requested verifications.
- G. Failure by the patient or guarantor to fulfill all responsibilities under any of the above programs, or who do

not provide the requested information necessary to completely and accurately assess their financial situation in a timely manner, may result in denial of the application for financial assistance. If at a later date it is discovered that the application was falsified, MHC reserves the right to cancel any financial assistance care awarded and bill the patient the account balance.

Application Process

- A. Each applicant will be required to complete a written or oral Financial Assistance Application and supply all required information.
- B. Printed copies of the Plain Language Summary, the Financial Assistance Policy, the Credit and Collection Policy, and the Financial Assistance Application are available at no cost in English and Spanish at Registration, Patient Financial Services locations, Emergency Room areas, and on the MHC website at www.munsonhealthcare.org/financialhelp
- C. Details of the required information to be submitted can be found on the website.
- D. Financial assistance approvals are valid for one year with a verification of income.
- E. Financial assistance will be considered for prior approval to services or any patient balance still held in accounts receivables at the time of application.
- F. As a general rule, account balances already in collections will require management approval to be eligible for consideration.
- G. Request for financial assistance shall be processed promptly and MHC shall notify the patient or applicant in writing within 30 days of receipt of a completed application.
- H. Any Munson Healthcare CFO, Corporate Director Revenue Cycle, Chief Revenue Officer, or Director of Patient Financial Services have the authority to approve a candidate or change the financial award based on extenuating circumstances. In addition, the Kalkaska Memorial Health Center CFO and CEO have the authority to approve a candidate or change the financial award based on extenuating circumstances for their hospital.
- I. For assistance in completing an application, the patient may contact any MHC Patient Financial Services location.

Appeal Process

- A. Patients who have been denied financial assistance may request that their case be reviewed by Patient Financial Services Administration for reconsideration. The request must be made in writing within 30 days of the postmark of the decision letter. The patient's request must detail current financial situation and why they feel they qualify for assistance.

Amounts Generally Billed (AGB)

- A. MHC complies with Internal Revenue Code (IRC), section 501(r), as no patient covered under this policy will be charged more than AGB. MHC determines AGB by multiplying the gross charges for any emergency or other medically necessary care it provides to a FAP-eligible individual by an AGB percentage. MHC calculates the AGB percentage using the look-back method prescribed by the IRS. The percentage is based on all claims allowed by Medicare and private health insurers over a specified 12-month period, divided by the associated gross charges for those claims. AGB percentages are calculated no less than annually for each Munson Healthcare hospital.

- B. Members of the public may obtain the current AGB percentage for any Munson Healthcare hospital (and a description of the calculation) in writing and free of charge by contacting Munson Healthcare Corporate Finance department.

Relationship to Collection Policy

- A. Munson Healthcare's internal and external collection practices referenced in the Credit and Collection Policy (003.001) (including actions the hospital may take in the event of non-payment, including collection actions and reporting to collection agencies) shall take into account the extent to which the patient qualifies for financial assistance, a patient's good faith effort to apply for a governmental program or for financial assistance from MHC, and a patient's good faith effort to comply with his/her payment agreements with MHC. For patients who qualify for financial assistance and who are cooperating in good faith to resolve their discounted hospital bills, MHC may offer extended payment plans, will not send unpaid bills to outside collection agencies, and will cease all collection efforts on any unpaid balances on accounts that were opened within one year of the date that the patient qualified for financial assistance under this policy. MHC will not impose extraordinary collections actions such as wage garnishments, liens on primary residences, or other legal actions for any patient without first making reasonable efforts to determine whether that patient is eligible for charity care under this financial assistance policy.

Reasonable efforts shall include:

1. Validating that the patient owes the unpaid bills and that all sources of third-party payments have been identified and billed by the hospital;
 2. Documenting that MHC has attempted to offer the patient the opportunity to apply for financial assistance pursuant to this policy and that the patient has not complied with the hospital's application requirements;
 3. Documenting that the patient has been offered the opportunity to enter into a payment plan but has not done so, or has entered into a payment plan but has not honored the terms of that plan.
- B. Patients will be notified of the availability of financial assistance for a period of at least 120 days from the date of the first post-discharge billing statement. Patient balances will be eligible for financial assistance consideration for at least 240 days from the date of the first post-discharge billing statement. (See Application Period under definitions).
- C. Members of the public may obtain the current Credit and Collection Policy for any Munson Healthcare hospital in writing and free of charge by contacting any Munson Healthcare Patient Financial Services department.

Communication of the Financial Assistance Program to the Public

- A. Notification about financial assistance available from MHC, which shall include a contact number, shall be disseminated through one or more of the following methods: information brochures available at the registration desks, information posted on facility websites, notices on patient bills; signs posted in Emergency departments and Urgent Care facilities.
- B. Additionally, Financial Counselors will attempt to visit all uninsured inpatients while the patient is in-house to assess financial need.
- C. A printed copy of this policy, the Credit and Collection Policy, the Plain Language Summary, and the Financial Assistance Application are available at no cost in English and Spanish on the Munson

Healthcare website, Registration and Emergency Room areas, or at any Munson Healthcare facility.

Attachments

- A. Physician Practices Who Do or Do Not Follow MHC's Financial Assistance Policy
- B. Financial Assistance Policy, Presumptive Eligibility

Attachments

- [Addendum A, 1-2020](#)
- [Addendum C.docx](#)
- [B: Financial Assistance Policy, Presumptive Eligibility](#)

Approval Signatures

Step Description	Approver	Date
System Policy Oversight Committee	Terri Fries: Document Mgmt Spec	3/3/2020
Policy Owner	Mark Hepler: VP & CFO	3/3/2020

Applicability

Cadillac Hospital, Charlevoix Hospital, Grayling Hospital, Kalkaska Memorial Health Center, Manistee Hospital, Munson Healthcare, Munson Medical Center, Otsego Memorial Hospital, Paul Oliver Memorial Hospital

Addendum A (Addenda A)

Physician Practices Who Do or Do Not Follow Munson Healthcare's Financial Assistance Policy
(Prácticas de médicos que siguen o no siguen la póliza de ayuda financiera de Munson Healthcare)

Table of Contents (Tabla de contenido)

Munson Medical Center

Munson Healthcare Kalkaska Memorial Health Center

Munson Healthcare Paul Oliver Memorial Hospital

Munson Healthcare Cadillac Hospital

Munson Healthcare Grayling Hospital

Munson Healthcare Charlevoix Hospital

Munson Healthcare Manistee Hospital

Munson Healthcare Otsego Memorial Hospital

Addendum A (Addenda A)

Munson Medical Center

Physician Practices Who Do or Do Not Follow

MHC's Financial Assistance Policy

(Prácticas de médicos que siguen o no siguen la póliza de ayuda financiera de MHC)

Specialty (Especialidad)	Practice (Práctica)	Follow MHC Financial Assistance Policy (Siguen la Póliza de Ayuda Financiera de MHC)
Allergy & Immunology	Bayside Allergy, PC	No
	Grand Traverse Allergy, PC	No
Anesthesiology	MHC Grand Traverse Anesthesia Associates, PC	Yes
Cardiology	Traverse Heart & Vascular	Yes
Cardiothoracic Surgery	MHC Cardiothoracic Surgeons of G.T.	Yes
Denistry	Dental Clinics North	No
	Associates in Family Dentistry	No
	Suttons Bay Dental Center, PLLC	No
Dermatology	Associates in Dermatology of TC	No
	Bay Area Dermatology	No
	Elk Rapids Skin & Laser Clinic	Yes
	Northwestern Michigan Dermatology, PC	No
	Skin Cancer & Dermatology Center	No
Emergency Medicine	MHC Northwestern MI Emergency Physicians	Yes
Endocrinology	MHC Endocrinology & Metabolism	Yes
ENT / Otolaryngology	Borovik, Harry MD (T.C. Office)	No
	Cass Street ENT Associates PC	No
Family Medicine	Thirlby Clinic	No
	Bay Area Family Care	No
	Best Medical Services, PLC	No
	Brookside Family Medicine	No
	Cherry Bend Family Care, PLC	No
	East Bay Medical	No
	Elk Rapids Medical Clinic	No
	Elk Rapids Primary Care	No
	Grand Traverse Band Family Health Clinic	No
	Hessler Wellness	No

	Leelanau Family Practice	No
	Munson Family Practice Center	Yes
	Northern Pines Health Center	No
	Pace North	No
	Partners in Family Practice	No
	Partners In Health	No
	Primary Care Sports Medicine, PC	No
	Roth, Katherine MD	No
	Ruoff, Gary DO	No
	West Front Primary Care	No
	Your Health Family Medicine	No
Gastroenterology	Digestive Health Associates	No
	Northern Michigan Gastroenterology, PLC	No
General Surgery	MHC General Surgery & Trauma	Yes
	Northwest Michigan Surgical Group, PC(Surgery Center)	Yes
	Vein Center	No
Gynecology	Women's Health Pavilion	No
Hematology & Oncology	Munson Oncology & Hematology	Yes
	Oncology Multidisciplinary Clinic	Yes
	Cancer Genetics Clinic	No
Hospitalists	Sound Physicians	Yes
Infectious Disease	MHC Infectious Disease Consultants	Yes
	MHC Thomas Judd Care Center	Yes
Internal Medicine	Pre-Operative Assessment Clinic	Yes
Internal & Family Medicine	Suttons Bay Medical Clinic	No
	Traverse Health Clinic	No
Internal Medicine	Grand Traverse Internal & Family Medicine	No
	Munson Milliken Medical	Yes
	Traverse Bay Internal Medicine	No
	Northern Michigan Medicine & Pediatrics	No
Nephrology	Munson Nephrology Consultants	Yes
Neurology	Lee, Heather Dr. DO, PLLC	No
	Salon, Matthew, MD	No
Neurosurgery, Neurology	Munson Neurology & Neurosurgery ☐	Yes
Neurosurgery, Neurology	Traverse Neurology (Cornelie,Robens,Lee,Kuesel,Bruining)	No
Obstetrics-Gynecology	Northwood Obstetrics & Gynecology	No
	Grand Traverse Women's Clinic	No

Occupational Medicine	MCHC Occupational Health & Medicine	Yes
Oncology, Infusion	MHC Cowell Family Cancer Center	Yes
Ophthalmology	Bay Eye Associates	No
	Cedar Run Eye Center	No
	Grand Traverse Ophthalmology Clinic	No
	Northern Vision Eye Care	No
	Potthoff Eye Care & Surgery	No
	Traverse City Eye Consultants, PC	No
Oral & Maxillofacial Surgery	Grand Traverse Oral Surgery	No
	Lakeside Oral Surgery	No
Orthopaedic Hand Surgery	Hand Surgery of Northern Michigan	No
Orthopaedic Surgery	Great Lakes Orthopaedics Center	No
	Traverse City Orthopedics & Sports Medicine	No
Palliative Care	Munson Hospice & Palliative Medicine Service	Yes
Pathology	MHC Grand Traverse Pathology, PLLC	Yes
Pediatric Cardiology, Endocrinology, Gastroenterology, Nephrology, Urology	Helen DeVos Children's Hospital	No
Pediatric Dentistry	Northern Michigan Pediatric Dentistry PC	No
Pediatrics	Grand Traverse Children's Clinic	No
	Kids Creek Children's Clinic	No
	Munson Patient Care Management	Yes
Physical Medicine & Rehabilitation	Mary Free Bed Rehabilitation Physicians	No
	MI Physical Medicine, PLC	No
	Neuromuscular & Rehabilitation Assoc.	No
	Northshore Rehab PLLC	No
Plastic Surgery	Center for Plastic Surgery of Northern Michigan	No
	Grand Traverse Plastic Surgery, PC	No
	Great Lakes Plastic Surgery Center	No
Podiatry	Advanced Foot & Ankle Center	No
	Ankle and Foot Associates	No
	Birch Tree Foot & Ankle Specialists	No
	Grand Traverse Foot & Ankle Center, PC	No
	Great Lakes Foot and Ankle Specialists	No
Psychiatry	Addiction Treatment Services	No
	Engel Mind & Body Psychiatry	No
	Munson Behavioral Health	Yes
	Munson Outpatient Psychiatric	Yes

	Northern Lakes Community Mental Health	No
	Well-Spring Psychiatry, P.C.	No
	Traverse City VA Clinic	No
Psychology	Bruning, Elizabeth G. PhD	No
	Comprehensive Pain Management Program (MCHC)	Yes
	MCHC Outpatient Rehab	No
	New Approaches Center	No
Psychology & Neuropsychology	Brain & Behavioral Health	No
Pulmonary Medicine	MHC Pulmonary and Critical Care	No
Radiation Oncology	Traverse Bay Radiation Oncologists, PC	Yes
Radiology	Grand Traverse Radiologists, PC	No
	MHC Smith Family Breast Health Center	Yes
Rheumatology	Arthritis and Osteoporosis Center	No
Sleep Disorders	Munson Sleep Disorder Center	Yes
Trauma Surgery	Munson Trauma & Acute Care Surgery Program	Yes
Urgent Care Medicine	BaySide Docs Urgent Care	No
	MHC Foster Family Community Health Center	Yes
Urology	MHC Bay Area Urology	Yes
Vascular Surgery	Vascular Center of Northern Michigan	No
Vitreoretinal Surgery	Associated Retinal Consultants, PC	No
Weight Management	Munson Comprehensive Weight Management Program	Yes
Wound Care	MHC Advanced Wound Care	Yes

Last updated 6/2020 MMC

Addendum A (Addenda A)

Munson Healthcare Kalkaska Memorial

Physician Practices Who Do or Do Not Follow

MHC's Financial Assistance Policy

(Prácticas de médicos que siguen o no siguen la póliza de ayuda financiera de KMHC)

Specialty (Especialidad)	Practice (Práctica)	Follow MHC Financial Assistance Policy (Siguen la Póliza de Ayuda Financiera de KMHC)
Palliative Care	Hospice of Michigan, Mark Zook	No
Family Medicine	Kalkaska Medical Associates	Yes
	Teen Health Corner	No
	Boardman Family Practice	No
Pediatrics	Kalkaska Memorial Behavioral Medicine Clinic	No
Last updated 6/2020 KMH		

Addendum A (Addenda A)
Munson Healthcare Paul Oliver Memorial
Physician Practices Who Do or Do Not Follow
MHC's Financial Assistance Policy
(Prácticas de médicos que siguen o no siguen la póliza de ayuda financiera de POMH)

Specialty (Especialidad)	Practice (Práctica)	Follow MHC Financial Assistance Policy (Siguen la Póliza de Ayuda Financiera de POMH)
Emergency Medicine	Crystal Lake Clinic- Interlochen	No
	Crystal Lake Clinic - Benzonia	No
Family Medicine	MHC POMH Empire Family Care	Yes
	Betsie Bay Medical Center	No
Family Practice, Pediatrics, Internal Med	Crystal Lake Clinic	No
Ophthalmology	Bay Eye Associates	No
Podiatry	Birch Tree Podiatry Group	No
	Sheldon, David DPM	No

Last updated 6/2020 POMH

Addendum A (Addenda A)

Munson Healthcare Cadillac Hospital

Physician Practices Who Do or Do Not Follow

MHC's Financial Assistance Policy

(Prácticas de médicos que siguen o no siguen la póliza de ayuda financiera de MHC Cadillac)

Specialty (Especialidad)	Practice (Práctica)	Follow MHC Financial Assistance Policy (Siguen la Póliza de Ayuda Financiera de MHC Cadillac)
Podiatry	Advanced Foot & Ankle Centers	No
Allergy & Immunology	Allergy & Asthma Specialists of Cadillac	No
Anesthesiology	MHC Cadillac Anesthesia	Yes
Emergency Medicine	Artesian Springs Medical Clinic	No
	Emergency Physicians Medical Group	No
	MHC-Urgent Care-Cadillac	Yes
Family Medicine	Cadillac Family Physicians	No
	Family Practice of Cadillac, PC	No
Family Practice, Internal Medicine	MHC Cadillac Primary Care	Yes
General Surgery	MHC Cadillac Surgical Care	Yes
Hospitalist	Sound Physicians	Yes
Internal & Family Medicine	Lake City Primary Care	No
Nephrology	Chowdhury MD, PLLC	No
Obstetrics-Gynecology	MHC Cadillac OB/GYN	Yes
Oncology	MHC Cadillac Cancer & Infusion Center	Yes
Ophthalmology	Riemer Eye Center	No
Orthopaedic Surgery	Orthopaedics and Sports Medicine of Cadillac	No
Orthopaedics	MHC Cadillac Orthopaedics	Yes
Otolaryngology	Cadillac ENT & Facial Plastic Surgery	No
Pathology	Grand Traverse Pathology	Yes
Pediatric Cardiology	Helen DeVos Children's Hospital Congenital	No
Pediatrics	Mackinaw Trail Health Pediatrics	No
Physical Medicine & Rehab	West Michigan Pain	No
Radiology	Grand Traverse Radiology	Yes
Urgent Care Medicine	Cadillac Urgent Care	No
Urology	Cadillac Urology Practice	No
Veins	Northern Michigan Vein Specialists	No

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Last updated 6/2020 Cadillac

Addendum A (Addenda A)

Munson Healthcare Grayling Hospital

Physician Practices Who Do or Do Not Follow

MHC's Financial Assistance Policy

(Prácticas de médicos que siguen o no siguen la póliza de ayuda financiera de MHC Grayling)

Specialty (Especialidad)	Practice (Práctica)	Follow MHC Financial Assistance Policy (Siguen la Póliza de Ayuda Financiera de MHC Grayling)
Anesthesiology	MHC Somnia Anesthesia Inc	Yes
Cardiology	Traverse Heart & Vascular	Yes
Emergency & Family Medicine	Emergency Physicians Medical Group	No
Endocrinology	Northern Michigan Endocrine, PLLC	No
Family & Internal Practice	MHC Milltown Primary Care Clinic	Yes
Family Medicine	MHC Crawford Continuing Care Center	Yes
	MHC Roscommon Community Health Center	Yes
	Grayling Family Practice Clinic	No
Family Practice, Internal, Pediatrics	MHC Grayling Physician Network	Yes
Family, Internal, Orthopedic	MHC Prudenville Community Health Center	Yes
General & Orthopaedic Surgery	MHC Grayling Surgical Services	Yes
Hematology & Oncology	MHC Grayling Cancer and Infusion Center	Yes
Hospitalist	Sound Inpatient Physicians	Yes
Nephrology	Dialysis & Nephrology Consultants	No
Neurosurgery	St. Mary's of Michigan Neurosurgery	No
Ophthalmology	Alpine Eye Care	No
	Northern Eye	No
Pathology	Grand Traverse Pathology	Yes
Pediatric Cardiology	Mid Michigan Pediatric Cardiology	No
Podiatry	Ankle & Foot Associates of Northern MI	No
Pulmonary Medicine	Ctr. for Pulmonary & Sleep Medicine PC	No
Radiology	Grand Traverse Radiology	Yes
Urology	MHC AuSable Urology, PC	Yes

Addendum A (Addenda A)

Munson Healthcare Charlevoix Hospital

Physician Practices Who Do or Do Not Follow

MHC's Financial Assistance Policy

(Prácticas de médicos que siguen o no siguen la póliza de ayuda financiera de MHC Charlevoix)

Specialty (Especialidad)	Practice (Práctica)	Follow MHC Financial Assistance Policy (Siguen la Póliza de Ayuda Financiera de MHC Charlevoix)
Anesthesiology	Anesthesia Staffing Consultants	No
	UPHS Bell	Yes
Emergency Medicine	Charlevoix Family Medicin	No
	Charlevoix Hospital Emergency Dept	Yes
Family & Internal Medicine	Boyne Area Health Center	Yes
	Charlevoix Physicians' Clinic	Yes
Family Medicine	Central Lake Family Health center	No
	Charlevoix Area Hospital	Yes
	Charlevoix Primary Care	Yes
General Surgery	Charlevoix Surgeons	Yes
Hemotology/Oncology	Charlevoix Hematology and Oncology	Yes
Internal Medicine	Little Traverse Primary Care	No
Neurosurgery	Neurosurgical Spine Specialists	No
Obstetrics-Gynecology	Charlevoix Women's Healthcare	Yes
Ophthalmology	Summit Park Eye Care Specialists	No
Orthopaedic Surgery	Bay Street Orthopaedics	No
Pediatrics	Charlevoix Pediatrics	Yes
Psychiatry	Charlevoix Behavioral Health	Yes
Radiology	Envision Radiology PLLC	No
Sleep Disorders	Charlevoix Sleep Center	Yes
Urology	Northern MI Urology	Yes

Addendum A (Addenda A)

Munson Healthcare Manistee

Physician Practices Who Do or Do Not Follow

MHC's Financial Assistance Policy

(Prácticas de médicos que siguen o no siguen la póliza de ayuda financiera de Manistee)

Specialty (Especialidad)	Practice (Práctica)	Follow MHC Financial Assistance Policy (Siguen la Póliza de Ayuda Financiera de MHC Manistee)
Anesthesiology	APC - Anesthesia Practice Consultants	No
	MHC Manistee Hospital	Yes
	MidMichigan Anesthesiology Group, PC	No
Dentistry	My Community Dental Centers	No
Emergency Medicine	Emergency Care Specialist	No
Family Medicine	Arcadia Medical	No
	Borenitsch, Kenneth DO	No
	Lakeshore Family Care, PC	No
	MHC Manistee Primary Care	Yes
	MHC Manistee Walk In Clinic	Yes
	Northern Pines Health Center	Yes
Family/General Practice	MHC Manistee Emergency Dept	Yes
Family/Internal Medicine	Crystal Lake Clinic - Benzonia	No
General Surgery	MHC Manistee General Surgery/Community Health Center	Yes
Hematology & Oncology	MHC Manistee Cancer and Infusion Center	Yes
Hospitalist	Sound Physicians	Yes
Internal Medicine	MHC Manistee Internal Medicine	Yes
Neurology	MHC Manistee Neurology	Yes
Obstetrics & Gynecology	MHC Manistee OB/GYN	Yes
Ophthalmology	Remier Eye Center	No
Orthopaedic Surgery	MHC Manistee Orthopedics	Yes
Otolaryngology	Western Michigan ENT	No
Pediatrics	Gunderson, Paul	No
	MHC Manistee Pediatrics	Yes

Podiatry	Foot & Ankle Clinic	No
Psychology	Edwards-Baumann, Barbara PsyD	No
Radiology	MHC Manistee Radiology	Yes
Sleep Disorders	MHC Manistee Sleep Center	Yes
Urology	MHC Manistee Urology	Yes
Wound Care	MHC Manistee Wound & Hyperbaric Center	Yes

Updated 6/2020 Manistee

Addendum A (Addenda A)

Munson Healthcare Otsego

Physician Practices Who Do or Do Not Follow

MHC's Financial Assistance Policy

(Prácticas de médicos que siguen o no siguen la póliza de ayuda financiera de Otsego)

Specialty (Especialidad)	Practice (Práctica)	Follow MHC Financial Assistance Policy (Siguen la Póliza de Ayuda Financiera de MHC Otsego)
Anesthesiology, Family & Internal Medicine, OB/GYN, Pediatrics, Urology, Surgery	Munson Healthcare OMH Medical Group-Gaylord, Elmira	Yes
Cardiology	Alpine Cardiology	No
	Michigan Heart & Vascular Specialists	No
Dentistry	Dental Clinics North	No
	Oral Surgery Specialists of NM	No
	Petoskey Pediatric Dentistry	No
Emergency Medicine	Munson Healthcare OMH ER	Yes
Family Medicine	Alpine Family Medicine	Yes
	Alpine Family Medicine	Yes
	Family First Medicine	No
	Gaylord Family Practice	No
	Gaylord Medical Center	No
	Kerr, William M.D., P.C.	No
	Mancelona Family Practice	No
	Munson Healthcare OMH Medical Group - Indian River	Yes
	Munson Healthcare OMH Medical Group - Lewiston	Yes
Hematology & Oncology	Munson Healthcare OMH Cancer & Infusion Center	Yes
Orthopaedic Surgery	Munson Healthcare OMH Orthopedic Surgery	Yes
	OMH N'Orthopedics	Yes
Otolaryngology	Great Lakes Ear Nose & Throat Specialists	No
	Petoskey ENT Specialists	No
Podiatry	Charlevoix Foot Clinic	No
	Sella, Steven DPM	No
Radiology	Northern Imaging Associates	No

Sleep Disorders	Center for Pulmonary & Sleep Medicine PC	Yes
Urgent Care Medicine	Munson HealthcareOMH Walk-In Clinic	Yes

Updated 6/2020 Otsego

ADDENDUM B**FINANCIAL ASSISTANCE POLICY, 003.003
PRESUMPTIVE ELIGIBILITY**

Presumptive eligibility may be determined on the basis of individual life circumstances, such as:

- State-funded prescription programs
- Homeless
- Women, Infants and Children program (WIC) participation
- Eligibility for other state or local assistance programs, such as BCCCP, etc.
- Patient is deceased with no known estate
- Medicaid or Medicaid HMO recipients who incur medically necessary non-payable charges
- State Disability Assistance (SDA)
- Discovery exam by an attorney
- The patient is currently eligible for Medicaid but was not eligible at the time of service
- External publicly-available data sources, e.g. credit scoring
- Breast and Cervical Cancer Control Navigation Program
- Traverse Health Clinic
- Emergency service only (Medicaid)
- Attestation (a written or verbal testimony in lieu of required documentation)

Addendum C

Munson Healthcare Cadillac Hospital Service Area

The counties and/or areas that Munson Healthcare Cadillac Hospital offers Financial Assistance to are as follows:

- Boon
- Cadillac
- Ewart
- Falmouth
- Fife Lake
- Harrietta
- Kalkaska
- Lake City
- Leroy
- Luther
- Manton
- Marion
- McBain
- Mesick
- Merritt
- South Boardman
- Tustin

Addendum C

Munson Healthcare Charlevoix Hospital Service Area

The counties and/or areas that Munson Healthcare Charlevoix Hospital offers Financial Assistance to are as follows:

- Charlevoix
- Antrim
- Lower west of Emmett, including the areas of Bay Shore, Petoskey, and some of Harbor Springs

Addendum C

Munson Healthcare Grayling Hospital Service Area

The counties and/or areas that Munson Healthcare Grayling Hospital offers Financial Assistance to are as follows:

- Comins
- Fairview
- Frederic
- Grayling
- Higgins Lake
- Houghton Lake Heights
- Houghton Lake
- Kalkaska
- Lewiston
- Luzerne
- Merritt
- Mio
- Prudenville
- Roscommon
- St. Helen