



## **FINANCIAL ASSISTANCE PROGRAM - PLAIN LANGUAGE SUMMARY**

ACMH offers Financial Assistance under a Financial Assistance Program to eligible individuals, providing partially or fully discounted emergent or medically necessary hospital care to eligible individuals and families. You can obtain an application and additional information from any of the sources below:

1. Phone a Financial Counselor at 724-543-8559 or 724-543-8720 between the hours of 7:00 a.m. and 3:30 p.m.
2. Download the application from the hospital website at [acmh.org](http://acmh.org)
3. Write to the Financial Counselor at ACMH Financial Counseling, 1 Nolte Drive, PO BOX 411, Kittanning PA 16201.
4. Visit the Customer Service Representative in the Customer Service Office, located in the main lobby of ACMH hospital.
5. Stop at any registration area of the hospital or our satellite locations and request information on Financial Assistance Programs.

Determination of Eligibility for the Financial Assistance Program is made based on review of a complete application and supporting documents, including proof of income, assets (when required), and liabilities. Generally, patients with family income of 200% of the Federal Poverty Level or less may be eligible for a discount of 100%. Patients with family income up to 400% of the Federal Poverty Level may be eligible for a discount of at least 25%. Patients and Families who are not eligible for discounts may participate in an established payment plan with our preferred vendor. Patients and families will not be charged more for Emergency or other medically necessary care than Amounts Generally Billed (AGB) to those patients who have insurance.

Translation of the Financial Assistance Program and application are available by request at the Financial Counseling Department of the hospital at the address listed above.

In order to make our patients, families, and the community aware of the Hospital's Financial Assistance Program, the Hospital has ensured that this information is available by posting of signage, development of this statement, and distribution of informational brochures at registration areas. Please contact Financial Counseling at the address or phone number stated above If you need additional information or have questions.

The Financial Assistance Program applies to ACMH and all providers covered under the hospital's tax ID number.

*Thank you for entrusting ACMH with your health care needs.*