

STEWART MEMORIAL COMMUNITY HOSPITAL  
1301 W. Main St.  
Lake City, Iowa 51449

FINANCIAL ASSISTANCE POLICY  
Plain Language Summary

Stewart Memorial Community Hospital shall fulfill their charitable missions by providing medically necessary hospital services to all individuals without regard to their ability to pay. SMCH shall provide fair financial assistance to low income underinsured or uninsured patients. SMCH shall use consistent and fair collection practices for all patients. This policy is in effect for dates of service on or after January 1, 2016.

Stewart Memorial Community Hospital is committed to meeting the needs of everyone in their communities, including those who cannot pay for their care. Similarly, patients who are able to pay have an obligation to pay and providers have a duty to seek payment from these individuals.

- Full charity care shall be provided to underinsured and uninsured patients earning 200% or less of the Federal Poverty Income Guideline (FPIG).
- A Financial Assistance Application must be completed and submitted with the required documentation. The required documentation consists of copies of the last 1 year income tax returns, last 2 bank statements, current pay stubs from all employers for all persons including children over the age of 19 that have resided in the household more than 6 months out of the last 12 months. This information must be submitted to the Business Office.
- Financial Assistance Policy and Financial Assistance Application are available at [stewartmemorial.org](http://stewartmemorial.org).
- Financial Assistance Policy information and Application may also be obtained at the SMCH Business Office or at any of the SMCH Registration areas including the Emergency Department and Clinic Registration areas.
- You may contact the SMCH Business Office at 712-464-3171 to request that the FAP and Application be mailed to you at no charge.
- Amounts charged for the hospital emergency or other medically necessary hospital care that is provided to individuals eligible for assistance under this policy may not be more than the amounts generally billed to individuals who have insurance covering such care. Amounts billed to those who qualify for financial assistance will be based on SMCH current Medicare cost to charge ratio.
- If you need assistance with Financial Assistance Application process, you may contact the SMCH Business Office at 712-464-3171, Monday through Friday from 8 a.m. until 4:30 p.m.

Stewart Memorial Community Hospital complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-712-464-4203.

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-712-464-4203。