

DEFINITIONS

Medically Necessary Services- Inpatient or Outpatient healthcare services provided for the purpose of evaluation, diagnosis and/or treatment of an injury, illness, disease or its symptoms, which if left untreated, would pose a threat to the patient's ongoing health status.

Indigent- Refers to patient that has no financial resources to pay the obligated charges.

Federal Poverty Level (FPL) - Poverty thresholds that are issued each year in the Federal Register by the Department of Health and Human Services (HHS) <http://aspe.hhs.gov/poverty>

Gross Household Income- Any gross earnings/benefit from Employment, Bureau of Worker's Compensation, Unemployment, Veterans Administration, Social Security, Social Security Disability, SSI, Department of Human Services Cash Benefit, Dividends, Interest, Alimony, Child Support, Rental Income or the sale of possessions.

Qualified Household -Includes the patient, patient's spouse and children (biological or adopted) who are under the age of eighteen and reside in the home.

Additional clarification:

- Excludes Step-Parent or Step-Children
- Shared Parenting-minor child's residence is determined by custodial parent's designation (school record)
- Separated Marital Status-If sharing household with spouse, spouse is a dependent must include spouse's gross income
- Separated Marital Status-No longer residing in household. No financial support. Spouse is included as a dependent. Income verification statement is required to confirm date of separation, and written notice-no longer sharing a residence or providing financial support to one another.
- Legal Custody (temporary or permanent) does not constitute a household dependent for grandparent or appointed guardian.
- Patient 18 years of age or older is defined as an adult that is responsible for himself or herself, regardless of full-time student status.

Self-employed- Income produced when one or more household members has a business or trade service through self or a created corporation.

Zero Income- No income for specified months. Requires a signed written statement with reference to resource assisting household with shelter and necessities.

Hospital Care Assurance (HCAP)-Assistance program for household incomes at or below the 100% Federal Poverty Level, provided for medically necessary healthcare services.

Catastrophic Financial Assistance-Excessive Medical Program-Assistance program for medically necessary services that is available for households with annual household income exceeding 300% of the Federal Poverty Level and excessive medical deb related to services incurred at GHS only. Patient's required self-pay responsibility will not exceed 30% of the annual household income.

Assets – Dollar value in Checking Account(s), Savings Account(s), Certificates of Deposit(s), Money Market(s), Stocks, Bonds, Mutual Funds, Property Value (exclude primary residence) and "Other" Assets-identified by the patient/guarantor on the Asset Review Form.

Asset Review Form/Asset Calculation Tool-Form that is completed and signed by the guarantor that will identify asset value and allow for calculations by GHS to determine the Excess Asset Responsibility due.

Annual Excess Asset Responsibility-Amount calculated based on the total value of qualified assets minus \$5,000 multiplied by the corresponding percent for all applicants whose annual income exceeds 100% of the Federal Poverty Level. Patient's responsibility will be determined each calendar year and will not be subject to financial assistance.