Mosaic Medical Center – Albany is committed to improving the health of individuals and communities located in our region. We seek to provide quality care to individuals, regardless of their ability to pay and have established a financial assistance program to help qualifying residents of our service area, with limited financial resources, in paying for their medical care.

**ELIGIBILITY**
A patient or guarantor (a person, other than the patient, who is responsible to pay the patient’s bill) is eligible for financial assistance, help or aid based on where he or she lives, gross (the amount before taxes and other amounts are taken from pay) household income, and the number of people living in the household.

**Residency:** To be approved for 100% financial assistance, you must be a permanent resident of Mosaic Medical Center – Albany’s primary service area or a student who is not a permanent resident attending school in one of these areas. Immigrants must have a “Permanent Resident Card” (Form I-551), “Resident Alien Card” or a “United States Citizen Identification Card.”

**Primary service area zip codes:**
- 64402 Albany
- 64420 Allendale
- 64433 Conception
- 64434 Conception Junction
- 64438 Darlington
- 64441 Denver
- 64453 Gentry
- 64456 Grant City
- 64457 Guilford
- 64458 Hatfield
- 64463 King City
- 64467 Martinsville
- 64471 New Hampton
- 64475 Parnell
- 64479 Ravenwood
- 64486 Sheridan
- 64489 Stanberry
- 64499 Worth
- 64657 McFall

Applicants living outside Mosaic Medical Center – Albany’s primary service area will be considered for discounted care based on gross income and household size.

**Gross household income:** Mosaic Medical Center – Albany patients or guarantors with gross household income up to 125 percent of Federal Poverty Guidelines. See reverse side for more information on gross household income and household size.

### Free and discounted care guidelines

<table>
<thead>
<tr>
<th>Federal poverty level from current year</th>
<th>Discount within primary service area**</th>
<th>Discount outside of primary service area**</th>
</tr>
</thead>
<tbody>
<tr>
<td>125% or Less</td>
<td>100%</td>
<td>50%</td>
</tr>
<tr>
<td>126% to 150%</td>
<td>50%</td>
<td>25%</td>
</tr>
<tr>
<td>151% to 200%</td>
<td>25%</td>
<td>15%</td>
</tr>
</tbody>
</table>

**ASSISTANCE**
Free care is given to medical center patients or guarantors who have a household income up to 125% of Federal Poverty Guidelines. A 50% discount is given to patients or guarantors whose income is between 126% to 150% of Federal Poverty Guidelines. A 25% discount is given to patients or guarantors whose income is between 151% to 200% of Federal Poverty Guidelines.

Depending on the patient’s or guarantor’s insurance coverage, a payment of up to $10 will be due for a Mosaic Medical Center – Albany visit, which may not be included in financial assistance.

**Limitations on fees and charges:** Those eligible for assistance will be granted a discount on Mosaic Medical Center – Albany bills for care that is medically necessary or an emergency, and the fees they must pay will not exceed the amount generally billed by Medicare and privately insured patients.

**How to obtain information and apply for assistance:** To get a free copy of the full Financial Assistance Policy and a financial assistance application, visit myMosaicLifeCare.org/myFinancialOptions or call our Patient Advocate at 660.726.3941 to request the information be mailed to you. You may also present to the Reception area at 705 N. College St., Albany, MO 64402 on Monday – Friday, 8 a.m. – 5 p.m.

If you need help filling out the financial assistance application, call 660.726.3941 to make an appointment.
Definition of household: Family of one is a person who may be the only one living in a housing unit or who may be living in a housing unit in which one or more persons also live, but are not related to the applicant by marriage, birth or adoption. For example, people who live with others include a lodger, a foster child, a ward or an employee. A family of two or more persons includes people who are related by marriage, birth or adoption who live together; all such related persons are thought of as members of one family; an unmarried couple with a mutual child; and same-sex couples who are married. If a household includes more than one unrelated family, the poverty guidelines are applied separately to each family and not to the household as a whole. Sometimes, a copy of a divorce decree or court documents proving legal separation may be required. If married, but not living together, income documents will be required from both people.

Definition of income: Income is how much everyone who lives in the household makes, before taxes are taken out, from all sources (gross income).

Income data for a part of a year may be figured based on what might have been received in an entire year to determine eligibility — for instance, by multiplying the amount of income received during the most recent three months by four.

<table>
<thead>
<tr>
<th>Number of Household</th>
<th>100% discount if income is equal to or below:</th>
<th>50% discount if income is equal to or below:</th>
<th>25% discount if income is equal to or below:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$15,950</td>
<td>$19,140</td>
<td>$25,520</td>
</tr>
<tr>
<td>2</td>
<td>$21,550</td>
<td>$25,860</td>
<td>$34,480</td>
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<tr>
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<tr>
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<td>$39,300</td>
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<tr>
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<td>$38,350</td>
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<tr>
<td>8</td>
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