

**FINANCIAL ASSISTANCE POLICY**

## Exhibit 1

<b>Participating Providers</b>	<b>Non-Participating Providers</b>
Arcand Family Medicine, Inc.	21st Century Oncology
Brookside Family Medicine	AAKC
Children's Medical Group	AAPRI
Home and Hospice Care of RI	Anchor Medical Associates
Hypertension & Nephrology	Anesthesia Associates of Kent County
Integrated Psychiatry Inc.	Anesthesiology, Inc.
Koch Eye Associates	Associates in Primary Care
Koch Eye Associates	Atwood Medical Associates
Nephrology Associates Inc	Barrington Pediatrics
Nephrology Associates Inc	Bayside Medical
Northern RI Pediatrics	Blackston Valley Community Health Center
Providence Pediatrics	Blackstone Orthopedics
RI Medical Imaging	Blackstone Valley Foot Specialists
Riverside Pediatrics	Blackstone Valley Pediatrics
The Medical Group of Rhode Island	Brain & Spine Neurosurgical Institute
University OB/GYN, Inc.	Bristol Medical Center
University Surgical Associates	Broadway OB/GYN
XRA Medical Imaging	Calenda Eye Care
James R. Bonner MD	Capitol Hill Health Center
Umberto Capuano MD	Cardiovascular Associates of Rhode Island
Doreen M. Ciancaglini MD	Cardiovascular Institute
Elizabeth Conklin MD	Cardiovascular Institute of NE
Joseph DiBenedetto MD	Caring for Women
Robert E. Eden MD	Center for OB-GYN
Christian R. Herard MD	Centerville Podiatry
Kenneth Hathaway DO	Chaffee Health Center
Jerald I. Kupperberg MD	Coastal Medical
Karen L. McGoldrick MD	Coastal Medical Bald Hill Pediatrics
Zsolt Orban MD	Coastal Medical East Providence
David R. Tien MD	Coastal Medical Hillside Family Medicine
Harold J. Wanebo MD	Coastal Medical Lincoln
Marvin S. Wasser MD	Coastal Medical Wakefield
	Coastal Medical Warren Pediatrics
	Coastal Plastic Surgery Center
	Community Care Alliance
	Comprehensive Healthcare
	Consultants in Urology

	Continuum Behavioral Health
	Coventry Primary Care Associates
	Dartmouth Dermatology Assoc
	David Kass MD Inc
	Davis & Davis
	Dermatology Professionals
	Doctors Rompf, Buckley and Wu
	East Bay Medical Center
	East Bay Neurology
	East Bay Pediatrics
	East Greenwich Family Practice
	East Greenwich Opthamology
	East Greenwich Pediatrics
	East Greenwich Spine&Sport
	East Side Pediatrics
	Endocrine Treatment Centers
	ENT & Allergy, Inc
	Facial Asthetics Center
	Family Doctors of E Providence
	Family Med Associates, So Attl
	First Physicians Cooperation
	Foot & Ankle Institute of NE
	Foundry Orthopedics
	Franklin Mirrer Orthopedic Surgeon, Inc.
	Fredy Roland MD Inc
	Full Circle Health
	Gastroenterology Associates
	Gastrointestinal Medicine Associates, Inc
	General Pediatric and Community Health
	Greenwich Medical Associates
	Greenwich Podiatry, Inc.
	Hahnemann Health Center
	Hawthorn Medical Associates
	Health First
	Hematology and Oncology Associates
	Hillside Family Medicine
	IVF New England
	Kingstown Pediatrics
	Laborists for Obstetrics & Gynecology LLC
	Meadows Edge Recovery Center
	Medical Associates of RI

	Medical Office Center
	Medicine and Long Term Care Associates
	Michael W. Lucarelli, D.O., Inc.
	Midland Medical
	MSL Facial and Oral Surgery
	Muehlberg Medical, LLC
	Nardone Medical
	Narragansett Bay Anesthesia
	Narragansett Foot and Ankle, Inc
	Neurohealth
	Neurosurgery Foundation
	Nisbet and Scott, Inc.
	North Main Radiation Oncology
	Northeast Institute of Plastic Surgery
	OB GYN Associates
	Obstetrical Associates
	Ocean State Osteopathic Medicine LLC
	Ocean State Pediatrics
	Ocean State Primary Care, LLC
	Olneyville Health Center
	O'Neill Medical, Inc.
	Ortho Rhode Island
	Osteopathic Family Medicine, LLC
	Partners in Pediatrics
	Partners in Primary Care, LLC
	Pediatric Associates
	Pediatric Heart Center
	Peter J. Bellafiore, M. D., Inc.
	Petteruti Family Practice
	Plexus Management Group, Inc.
	Prima Pediatrics
	Primary Care for Women and Adolescents
	Primary Care of Plainville
	Primary Medical Group Warwick
	Providence Anesthesiologists, Inc
	Providence Anesthesiologists, Inc
	Providence Community Health Centers
	Providence Urology, LLC
	Rely Radiology Group
	Rely Radiology Group
	Rhode Island Spine Center

	RI Colorectal Clinic, LLC
	RI Eye Institute
	RI Foot Care
	RICBT
	Roger Williams Medical Associates
	Roger Williams Radiation Therapy
	Santiago Medical Group
	Smithfield Pediatrics
	South County Dept of Emergency Medicine
	South County Dept of Medicine
	South County Dept of Pathology
	South County Foot and Ankle
	South County Hospital Dept of Anesthesiology
	South County Oral, Maxillofacial & Implant Surgical Center
	South County Orthopedics and Physical Therapy, Inc.
	South County Podiatry
	South County Pulmonary Medicine
	Specialist On Call, Inc
	Swansea Family Practice Group
	Swansea Pediatrics
	The Neurology Foundation
	Thundermist Health Center
	Toll Gate Pediatrics
	Tollgate OB/GYN
	Tri County Urology
	Tri-Town Health Center
	University Dermatology
	University Emergency Medicine Foundation
	University Foot and Ankle
	University Gastroenterology
	University Medical Group
	University Medicine Foundation
	University Urological Associates
	University Urological Assts
	Urologic Specialists of NE
	Urology Associates
	Virtual Radiologic Corporation
	Wakefield Pediatrics, LLC
	Warwick Family Medicine
	Waterman Pediatrics
	WellOne Primary Medical & Dental Care

	West Bay Orthopedics
	West Bay Surgical Associates, Inc
	Wickford Internists
	Women's Health Care Specialist
	Womens Health Collaborative
	Womens Medical Center of RI
	Women's Medical Collaborative
	Women's Medicine Collaborative at Lifespan
	Wood River Health Service
	Your Health, Inc
	Brian G. Abbott MD
	J. Gary Abuelo MD
	Charles A. Adams MD
	Sun H. Ahn MD
	Edward Akelman MD
	Michele Albert MD
	Jason M. Aliotta MD
	Elizabeth L. Altenhein MD
	Rachel A. Altura MD
	Angela C. Anderson MD
	James A. Arrighi MD
	Karen E. Aspary MD
	Michael K. Atalay MD
	David T. Barrall MD
	Barry Shah MD
	Salman Bashir MD
	Steven R. Bayer MD
	Curt G. Beckwith MD
	M. David Beitle MD
	Scott E. Benzuly MD
	Lionel G. Bercovitch MD
	Harikrasha B. Bhatt MD
	Reena A. Bhatt MD
	Natasha Bica MD
	Stanley H. Block MD
	Leland S. Blough DMD
	Andrew S. Blum MD
	Michael F. Blundin MD
	Aimee L. Bollentin NP
	Jason B. Boudjouk MD
	Karl H. Breuing MD

	Cheryl Brodsky MD
	Jeffrey M. Brody MD
	Jennifer L. Buckley MD
	Lucy P. Buckley MD
	Evan J. Burke MD
	Mary V. Cabral RNP
	Luisa F. Cala Cala MD
	Anthony A. Caldamone MD
	Angela M. Caliendo MD, PhD
	Angelo J. Cambio MD
	Joseph A. Cambio DO
	Nathalie A. Campbell MD
	Juan Carlos Canton MD
	Marshall W. Carpenter MD
	Sandy Chai MD
	Philip A. Chan MD
	Heather A. Chapman MD
	Johnny Chavarria MD
	Anjulika Chawla MD
	Joseph A. Chazan MD
	Wendy S. Chen MD, PhD
	Vicky O. Cheng MD
	Steven Ira Cohen MD
	Louis A. Colantonio MD
	John E. Concannon DO
	Jeannine S. Connolly MD
	Michael D. Connolly MD
	George N. Cooper MD
	A. Michael Coppa MD
	Bernard G. Coppolelli DPM
	Christopher J. Cosgrove MD
	Doris T. Costello MD
	John J. Cronan MD
	Charles L. Cronin III DO
	Michael L. Cummings MD
	Cheston B. Cunha MD
	Karen L. Daigle MD
	Leena Davis MD
	Susan E. Day MD
	Charles J. DeAngelis MD
	Bradley D. Denardo MD

	Penelope H. Dennehy MD
	Phyllis A. Dennery MD
	Angela K. DeRobertis MD
	Suvekchha Devkota MD
	Paula A. DeYoung MD
	Joseph A. DiLorenzo MD
	John DiOrio MD
	Thomas A. DiPetrillo MD
	Lisa R. Domagalski MD
	Donald M. McNiece MD
	Edward M. Donnelly MD
	Andrea M. Doyle MD
	Gregory J. Dubel MD
	John E. Duhaime DMD
	Margaret M. Dyer MD
	Lee E. Edstrom MD
	Peter T. Evangelista MD
	Mohammed K. Faizan MD
	Stephen S. Falkenberry MD
	Seth Feder MD
	Lloyd R. Feit MD
	Anna B. Filip MD
	Patricia J. Flanagan MD
	Timothy P. Flanigan MD
	Cheryl A. Flynn MD
	Sara R. Ford MD
	Karen L. Furie MD MPH
	Darlene Gabeau MD, PhD
	Siavash Ghoreishi MD
	Sharon E. Gibson MD
	Alfredo Gil MD
	Holly C. Gil MD
	Altongy Gilbert MD
	Richard G. Gillerman MD
	Jennifer L. Gillis NPP
	Kelvin D. Gillman MD
	Isaac Z. Glatstein MD
	Frederick A. Godley MD
	Richard L. Gold MD
	Daniel M. Golding MD
	Leon A. Goldstein MD

	Dragan J. Golijanin MD
	Paari S. Gopalakrishnan MD
	Leslie B. Gordon MD, PhD
	Robyn A. Gray DO
	Jennifer J. Greene Welch MD
	Donna Griffith MD
	Jan C. Groblewski MD
	Nicholas M. Grumbach MD
	Joseph B. Guarnaccia MD
	Preeti Gupta MD
	Fadlallah G. Habr MD
	Cynthia M. Hanna MD
	Gita V. Harappanahally MD
	David T. Harrington MD
	Joseph I. Harwell MD
	Tawfik F. Hawwa MD
	Daithi (David) J. Heffernan MD
	Jaroslav T. Hepel MD
	Herbert J Brennan DO
	Richard Hernandez PA
	Michael I. Herzlinger MD
	Pamela C. High MD
	Pei-Li Huang MD
	Michelle L. Hughes MD
	Kathleen Hwang MD
	Sarah M. Hyder MD
	Vincent R. Iacono MD
	Marc A. Jaffe MD
	Santiago Jimenez MD
	John Barrett DO
	John O'Leary DO
	Curtis T. Jones MD
	Elaine Jones MD
	Joseph B. Fitzgerald MD
	Joseph Guarnaccia MD
	Stephen S. Kasparian MD
	Vania L. Kasper MD
	Steven C. Katz MD
	Roy C. Katzin MD
	Edward C. Keating MD
	Karen L. Kerman MD



	Martin J. Kerzer DO
	Karim Z. Khanbhai MD
	Tareq Kheirbek MD
	Amin Kim MD
	Timothy J. Kinsella MD
	Malcolm M. Kirk MD
	James R. Klinger MD
	Tolga N. Kokturk MD
	R. James J. Koness MD
	Alla Korennaya MD
	Ania I. Kowalik MD
	Robin A. Kremsdorf MD
	Andrea Kretzschmar MD
	Arlet G. Kurkchubasche MD
	Daniel K. Kwan MD
	Neil D. LaBove MD
	Ashley M. Lakin DO
	Robert E. Lambiase MD
	Steven C. Lane MD
	Jerome M. Larkin MD
	Elizabeth Lazarus MD
	Carine M. Leconte MD
	George Y. Lee MD
	Joshua C. Leighton MD
	Neal S. LeLeiko MD, PhD
	Kara L. Leonard MD
	Maggy Lespinasse MD
	Levis Guzman MD
	Stacey P. Lievense MD
	Paul Y. Liu MD
	Kristin C. Lombardi MD
	Phyllis T. Losikoff MD MPH
	David A. Lowe MD
	Stephanie Lueckel MD
	Daniel F. Lukowicz MD
	Francois I. Luks MD
	Keith E. Macksoud CRNA
	Teresa M. Maine NP
	Martha B. Mainiero MD
	Thomas E. Mancini DPM
	David E. Mandelbaum MD, PhD

	Lauren J. Massingham MD
	Stephen L. Matarese DO
	Alla Matsievskaya MD
	David M. Mayer MD
	Katherine D. Mc Cleary MD
	Thomas McCauley MD
	Charles E. McCoy MD
	Alyson J. McGregor MD
	Paul F. McKenney MD
	Robin L. McKinney MD
	Megan D. McMahan MD
	Ildiko Medve MD
	Dhhananjay A. Mehta MD
	Roger N. Mennillo MD
	Nishant D. Merchant MD
	Leonard A. Mermel DO
	Pierre R. Michaud MD
	Ian C. Michelow MD
	Michael E. Migliori MD
	Stephen J. Migliori MD
	Maria D. Mileno MD
	Richard P. Millman MD
	Thomas J. Miner MD
	Mohamed Azzouz MD
	Wayne B. Mollohan DMD
	Sean F. Monaghan MD
	John R. Morton MD
	Christopher S. Muratore MD
	Timothy P. Murphy MD
	Adelaide G. Nardone MD
	Gerard J. Nau MD
	David P. Neumann MD
	Laura S. Nevel MD
	Chad P. Nevola MD
	Graham J. Newstead MD
	Karen Y. Ng MD
	Van T. Nguyen MD
	J. Douglas Nisbet MD
	Arthur W. Noel MD
	Richard B. Noto MD
	Richard K. Ohnmacht MD

	Brian R. Ott MD
	Adam D. Pallant MD
	Martin R. Papazian MD
	John A. Pezzullo MD
	Chanika Phornphutkul MD
	Marcelle L. Piccoello MD
	Caroline J. Plamondon MD
	Beth J. Plante MD
	Dieter Pohl MD
	Lee A. Polikoff MD
	Glenn S. Prescod MD
	Fortunato Procopio MD
	Albert J. Puerini MD
	Mohamedyakub A. Puthawala MD
	Jose Bernardo Q. Quintos MD
	Abrar A. Qureshi MD
	Dante A. Ramos MD
	Rebecca M. Reece MD
	Frances C. Regas MD
	Thomas M. Renaud MD
	Celia F. Reyes MD
	Josiah D. Rich MD, MPH
	Mark S. Ridlen MD
	Syed A. Rizvi MD
	Jeffrey M. Rogg MD
	Patricia A. Rompf MD
	Roseanne M. Lowe RN, PhD
	Mark Rosenberg MD
	Albert M. Ross MD
	Julie L. Roth MD
	Leslie A. Roth MD
	Kathleen M. Rotondo MD
	Susan A. Rudders MD
	Ali Saad MD
	George M. Sachs MD
	Gregory Sadovnikoff MD
	Kenneth H. Salzsieder MD
	Richard P. San Antonio MD
	Margaret D. Scheffler MD
	Mark F. Scott MD
	Ivona Sediva MD

	Robert J. Settipane MD
	Timothy D. Shafman MD
	Nishit S. Shah MD
	Bahram Shah-Hosseini MD
	Linda B. Shalon MD
	Jason M. Shapiro MD
	Katherine M. Sharkey MD
	Alexandra Sherman MD
	Mark Sigman MD
	Brian Silver MD
	Jared A. Silverstein MD
	Melissa A. Simon MD
	Mark S. Siskind MD
	Michael A. Smit MD
	Linda K. Snelling MD
	Barbara L. Soares MD
	Patricia M. Solga MD
	Bernard P. St. Jean MD
	Gregory Steinmetz MD
	Michael A. Steller MD
	Andrew H. Stephen MD
	Edward I. Suh MD, MPH
	Patrick K. Sullivan MD
	Rachel A. Sullivan MD
	Lisa M. Swartz Topor MD
	David W. Swenson MD
	Charu Taneja MD
	John M. Tarro MD
	Charlene A. Tate MD
	Albert E. Telfeian MD PhD
	Christopher M. Tessier MD
	Simone Thavaseelan MD
	Edward S. Thomas MD
	Michael A. Thursby DO
	Andrew J. Tompkins MD
	Thomas F. Tracy MD
	Melissa H. Tukey MD
	Glenn A. Tung MD
	Allan R. Tunkel MD
	George A. Turini MD
	Tammy L. Van Dine DPM

	William F. Varr MD
	Nico W. Vehse MD
	Sunil P. Verma MD
	Marguerite B. Vigliani MD
	Colleen C. Vitale MD
	Patrick M. Vivier MD, PhD
	Thomas Walek MD
	Michael T. Wallach MD
	Walter F. Roettinger II MD
	Lauren S. Ward MD
	Nicholas S. Ward MD
	Robert C. Ward MD
	David E. Wazer MD
	Paul Wehbe MD
	Arnold-Peter C. Weiss MD
	Abby White DO
	Doreen Wiggins MD
	Hale E. Wills MD
	Jeffrey M. Wilson MD
	Albert S. Woo MD
	Fred M. Wu MD
	Pei-Chi Wu MD
	Yvette E. Yatchmink MD
	Steven H. Young DDS
	Richard J. Zienowicz MD
	Alison E. Zimon MD
	Jeanne E. Ziter MD

# FINANCIAL ASSISTANCE POLICY

## Exhibit 2

### REQUIREMENTS FOR FINANCIAL ASSISTANCE PROGRAM – UNINSURED

The following documentation, if applicable, must accompany an application for Care New England Financial Assistance.

- 1) Tax return with supporting documentation for the most recent year filed.
- 2) Income Records\*(*see detailed explanation below*)
  - a) current pay stubs (minimum of 4 weeks)
  - b) Disability award letter
  - c) Social Security award letter (waived if direct deposit and bank statement is provided)
  - d) Parent's income (tax return) when person applying for financial assistant is a student
- 3) Asset Records\*\* (*see detailed explanation below*)
  - a) Bank Statements including savings, checking, investment statements, annuities, CD's, money market accounts, stocks, bonds, pensions and IRAs
  - b) Cash value of life insurance policies.
  - c) Personal property (other than primary residence and motor vehicle for personal use)
- 4) Medical Assistance and/or HealthSource RI approval/denial
- 5) Copy of death certificate if applicable.
- 6) Proof of student status if applicable.
- 7) Letter of support if applicable.

**\*Income Records:** Income means the actual or estimated total annual cash receipts before taxes from salaries, wages, self-employment income, child care income, rental income, unemployment compensation, temporary disability insurance, child support, alimony, worker's compensation, veteran's benefits, social security payments, dividend and interest income, royalties, private and public pensions, and public assistance. Also included in income are strike benefits, net lottery and gambling winnings and one-time insurance payments or injury compensation received in the calendar year in which the financial aid is sought for the hospital services.

**\*\*Asset Records:** Assets means cash, cash-equivalent and other hard assets that can be converted into cash, including cash on hand, savings accounts, checking accounts, Certificates of Deposits (CDs), money market accounts, stocks (common and preferred), bonds, mutual funds, IRAs, 401(k) s, 403(b) s, 457s, cash-in value of life insurance policies, personal property, motor vehicles other than for personal use, second homes and rental properties. Excluded from assets are primary resident and motor vehicle for personal use.

## APPLICATION FOR HOSPITAL FINANCIAL AID

Any approval of this request is temporary and expires 12 months from date of approval

Hospital: <input type="checkbox"/> Butler <input type="checkbox"/> Kent <input type="checkbox"/> Memorial <input type="checkbox"/> Women & Infants		Date:
Patient:	Guarantor/Spouse:	
MR#:	MR#:	
Date of Birth:	Social Security # (if issued):	
Social Security # (if issued):	Home Phone:	
Home Phone:	Work Phone:	
Work Phone:	Relation to Patient:	
Home Address:	Address:	
Occupation & Employer:		
Employer Address:		

Language:  English  Non-English

Ethnicity:  Hispanic  Non-Hispanic  No Ethnicity Identified

Race:  Asian  American Indian/Alaska Native  Black/African American  Native Hawaiian/Pacific Islander  
 White  Other or Multiple Races  No Race Identified

Please provide the following information for ALL members of the family unit, EXCEPT the Patient or Guarantor.			
Name & Relationship to Patient:	SS# (if issued):	Date of Birth:	MR#:
Employer, Phone & Address:	Home Address:		
Name & Relationship to Patient:	SS# (if issued):	Date of Birth:	MR#:
Employer, Phone & Address:	Home Address:		
Name & Relationship to Patient:	SS# (if issued):	Date of Birth:	MR#:
Employer, Phone & Address:	Home Address:		
Name & Relationship to Patient:	SS# (if issued):	Date of Birth:	MR#:
Employer, Phone & Address:	Home Address:		
MONTHLY INCOME		ASSETS	
Patient's Salary & Wages:	Savings:		
Spouse's Salary & Wages:	Checking:		
Guarantor's Salary & Wages:	Certificates of Deposit (CDs):		
Self-Employment Income:	Money Market Accounts:		
Child Care Income:	Savings Bonds:		
Rental Income:	Stocks:		
Unemployment Compensation:	Bonds:		
Temporary Disability Insurance:	Mutual Funds:		
Child Support:	IRAs:		
Alimony:	401(k)s:		
Workers' Compensation:	403(b)s:		
VA Benefits:	457s:		
Social Security Payments:	Cash-In Value Life Insurance:		
Dividend & Interest Income:	Personal Property:		
Royalties:	2nd Home & Rental Property:		
Pensions:	2nd Motor Vehicle:		
Public Assistance:	<b>TOTAL:</b>		
Other:			
<b>MONTHLY INCOME:</b>			
<b>ANNUAL INCOME:</b>			

"I request the hospital to make a determination of eligibility for financial aid. I understand that this information is confidential and subject to verification by the hospital. I also understand that if the information I provide is false, I may be denied financial aid and be liable for payment for the hospital services provided. I hereby attest that the information in this application is complete and correct to the best of my knowledge and that I understand the process and my responsibilities."

Patient's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Hospital Representative's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## REQUIREMENTS FOR FINANCIAL ASSISTANCE PROGRAM – UNDERINSURED

The following documentation, if applicable, must accompany an application for Care New England Financial Assistance.

- 1 Tax return with supporting documentation for the most recent year filed.
- 2 Income Records\*(*see detailed explanation below*)
  - a. Current pay stubs (minimum of 4 weeks)
  - b. Disability award letter
  - c. Social Security award letter (waived if direct deposit and bank statement is provided)
  - d. Parent's income (tax return) when person applying for financial assistant is a student
- 3 Asset Records\*\* (*see detailed explanation below*)
  - a. Bank Statements including savings, checking, investment statements, annuities, CD's, money market accounts, stocks, bonds, pensions and IRA's
  - b. Cash value of life insurance policies.
  - c. Personal property (other than primary residence and motor vehicle for personal use)
- 4 Medical Assistance and/or HealthSource RI approval/denial
- 5 Copy of death certificate if applicable.
- 6 Proof of student status if applicable.
- 7 Letter of support if applicable.
- 8 Expenses and Liabilities
- 9 Most recent statement for mortgage/rent, property taxes, utilities, automobile payments/leases, credit cards, installment loans, auto/home insurance, medical expenses and other expenses.

**\*Income Records:** Income means the actual or estimated total annual cash receipts before taxes from salaries, wages, self-employment income, child care income, rental income, unemployment compensation, temporary disability insurance, child support, alimony, worker's compensation, veteran's benefits, social security payments, dividend and interest income, royalties, private and public pensions, and public assistance. Also included in income are strike benefits, net lottery and gambling winnings and one-time insurance payments or injury compensation received in the calendar year in which the financial aid is sought for the hospital services.

**\*\*Asset Records:** Assets means cash, cash-equivalent and other hard assets that can be converted into cash, including cash on hand, savings accounts, checking accounts, Certificates of Deposits (CDs), money market accounts, stocks (common and preferred), bonds, mutual funds, IRAs, 401(k) s, 403(b) s, 457s, cash-in value of life insurance policies, personal property, motor vehicles other than for personal use, second homes and rental properties. Excluded from assets are primary resident and motor vehicle for personal use.



## APPLICATION FOR HOSPITAL FINANCIAL AID-*UNDERINSURED*

Any approval of this request is temporary and expires 12 months from date of approval

Hospital: <input type="checkbox"/> Butler <input type="checkbox"/> Kent <input type="checkbox"/> Memorial <input type="checkbox"/> Women & Infants		Date:
Patient:	Guarantor/Spouse:	
MR#:	MR#:	
Date of Birth:	Social Security # (if issued):	
Social Security # (if issued):	Home Phone:	
Home Phone:	Work Phone:	
Work Phone:	Relation to Patient:	
Home Address:	Address:	
Occupation & Employer:		
Employer Address:		
Language: <input type="checkbox"/> English <input type="checkbox"/> Non-English		
Ethnicity: <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic <input type="checkbox"/> No Ethnicity Identified		
Race: <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Black/African American		
<input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Other or Multiple Races <input type="checkbox"/> No Race Identified		

**Please provide the following information for ALL members of the family unit, EXCEPT the Patient or Guarantor.**

Name & Relationship to Patient:	SS# (if issued):	Date of Birth:	MR#:
Employer, Phone & Address:	Home Address:		
Name & Relationship to Patient:	SS# (if issued):	Date of Birth:	MR#:
Employer, Phone & Address:	Home Address:		
Name & Relationship to Patient:	SS# (if issued):	Date of Birth:	MR#:
Employer, Phone & Address:	Home Address:		
Name & Relationship to Patient:	SS# (if issued):	Date of Birth:	MR#:
Employer, Phone & Address:	Home Address:		

MONTHLY INCOME	AMT	ASSETS	AMT	MONTHLY EXPENSES/LIABILITIES	AMT
Patient's Salary & Wages		Savings		Mortgage or Rent Payment	
Spouse's Salary & Wages		Checking		Current Balance _____	
Guarantor's Salary & Wages		Certificates of Deposit (CDs)		Property Taxes if not included in mortgage payment	
Self-Employment Income		Money Market Accounts		Utilities: Gas/Electric/Oil _____	
Child Care Income		Savings Bonds		Cable/Internet _____	
Rental Income		Stocks		Phone _____	
Unemployment Compensation		Bonds		Auto Payments or Lease Payments	
Temporary Disability Insurance		Mutual Funds		Current Balance _____	
Child Support		IRAs		Credit Card Payments	
Alimony		401(k)s		Current Balance _____	
VA Benefits		403(b)s		Installment Loans	
Social Security Payments		457s		Current Balance _____	
Dividend & Interest Income		Cash-In Value Life Insurance		Auto Insurance	
Royalties		Personal Property		Homeowners Insurance	
Pensions		2nd Home & Rental Property		Medical Expenses	
Public Assistance		Additional Motor Vehicles		Groceries	
Other				Other Expenses	
<b>MONTHLY INCOME:</b>					
<b>ANNUAL INCOME:</b>			<b>TOTAL:</b>		<b>TOTAL:</b>

"I request the hospital to make a determination of eligibility for financial aid. I understand that this information is confidential and subject to verification by the hospital. I also understand that if the information I provide is false, I may be denied financial aid and be liable for payment for the hospital services provided. I hereby attest that the information in this application is complete and correct to the best of my knowledge and that I understand the process and my responsibilities."

Patient's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Hospital Representative's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## FINANCIAL ASSISTANCE POLICY

Exhibit 3:

### Sliding Scale

#### CNE FINANCIAL ASSISTANCE PROGRAM 2016 FINANCIAL ELIGIBILITY GUIDELINES

Effective 3/1/2016

Percent of Poverty Level:		200%	210%	220%	230%	240%	250%	260%	270%	280%	290%	300%
Family Size	FPG											
2016 Patient liability		0%	20%	40%	60%	80%	90%	90%	90%	95%	95%	95%
1 Max Liability Per Year	11,880	23,760	24,948 2,495	26,136 2,614	27,324 2,732	28,512 2,851	29,700 2,970	30,888 3,089	32,076 3,208	33,264 3,326	34,452 3,445	35,640 3,564
2 Max Liability Per Year	16,020	32,040	33,642 3,364	35,244 3,524	36,846 3,685	38,448 3,845	40,050 4,005	41,652 4,165	43,254 4,325	44,856 4,486	46,458 4,646	48,060 4,806
3 Max Liability Per Year	20,160	40,320	42,336 4,234	44,352 4,435	46,368 4,637	48,384 4,838	50,400 5,040	52,416 5,242	54,432 5,443	56,448 5,645	58,464 5,846	60,480 6,048
4 Max Liability Per Year	24,300	48,600	51,030 5,103	53,460 5,346	55,890 5,589	58,320 5,832	60,750 6,075	63,180 6,318	65,610 6,561	68,040 6,804	70,470 7,047	72,900 7,290
5 Max Liability Per Year	28,440	56,880	59,724 5,972	62,568 6,257	65,412 6,541	68,256 6,826	71,100 7,110	73,944 7,394	76,788 7,679	79,632 7,963	82,476 8,248	85,320 8,532
6 Max Liability Per Year	32,580	65,160	68,418 6,842	71,676 7,168	74,934 7,493	78,192 7,819	81,450 8,145	84,708 8,471	87,966 8,797	91,224 9,122	94,482 9,448	97,740 9,774
7 Max Liability Per Year	36,730	73,460	77,133 7,713	80,806 8,081	84,479 8,448	88,152 8,815	91,825 9,183	95,498 9,550	99,171 9,917	102,844 10,284	106,517 10,652	110,190 11,019
8 Max Liability Per Year	40,890	81,780	85,869 8,587	89,958 8,996	94,047 9,405	98,136 9,814	102,225 10,223	106,314 10,631	110,403 11,040	114,492 11,449	118,581 11,858	122,670 12,267

Patients will be charged the lesser of the maximum liability per year or AGB, whichever is less.

## FINANCIAL ASSISTANCE POLICY

### Exhibit 4

#### Amount Generally Billed (AGB)

In accordance with IRC §501(r) (5) CNE utilizes the Look-Back Method to calculate its AGB percentage. The AGB % is calculated annually and is based on all claims allowed by Medicare Fee-for-Service + all Private Health Insurers over a 12-month period, divided by the gross charges associated with those claims. The applicable AGB % will be applied to gross charges to determine the AGB.

Any individual determined to be eligible for financial assistance under this FAP will not be charged more than AGB for any emergency or other medically necessary healthcare services. Any FAP-eligible individual will always be charged the lesser of AGB or any discount available under this policy.

Effective October 1, 2016

Butler Hospital	47%
Memorial Hospital of Rhode Island	34%
Kent County Memorial Hospital	32%
Women and Infants Hospital	40%