



Financial Assistance Policy (FAP) Plain Language Summary - for Pershing Memorial Hospital, Community Medical Associates, and Meadville Medical Clinic

Financial Assistance is available to patients living in Linn, Chariton, Carroll, Adair, Grundy, Livingston, Macon, and Sullivan counties. Patients who meet certain income guidelines may qualify for a partial or full discount on all emergency and medically necessary services. A FAP-eligible individual may not be charged more than the amounts generally billed for emergency or other medically necessary care.

Applying for Financial Assistance – you may apply for financial assistance at any time – before, during, or after your care, up to 240 days after your first post-discharge billing statement. A completed application has to be submitted within 240 days following the date of the first post-discharge billing statement. The patient acknowledges that he or she has made a good faith effort to provide all information requested in the application to assist the hospital/clinic in determining whether the patient is eligible for financial assistance.

ER Co-pays – is the amount specified on your insurance card, or if nothing is stated, a set amount will be conveyed at the point of service

Clinic Co-pays – is the amount specified on your insurance card.

Additional Languages – our financial assistance policy, application, or plain language summary can be conveyed at the point of service.

FINANCIAL ASSISTANCE EVALUATION – PHONE 660.258.1197 OR 660.258.1198

Email: collections@phsmo.org or collections2@phsmo.org

IMPORTANT: YOU MAY BE ELIGIBLE TO RECEIVE FREE OR DISCOUNTED CARE.

Completing this application will help Pershing Health System determine if you can receive free or discounted services or are eligible for other public programs that can help pay for your healthcare.

Please complete this form and submit it to the hospital or clinics in person or by mail:

- **Pershing Hospital** – 130 East Lockling, Brookfield MO 64628 // Phone: 660.258.1197 or 660.258.1198
- **Community Medical Associates** – 130 East Lockling, PO Box 408, Brookfield MO 64628 Phone:660.258.1050
- **Meadville Medical Clinic** – 101 East Hayward, PO Box 131, Meadville MO 64659 // Phone: 660.258.1050

Apply electronically at <https://phsmo.org/financial-assistance>, or by fax to 660.258.1222 (hospital) or 660.258.1052 (clinic) Attn: Collections Dept.