NATIONWIDE CHILDREN'S
When your child needs a hospital, everything matters.℠

PATIENT ACCOUNTS – HOSPITAL BILLING
Policies and Procedures

Policy Title: **FINANCIAL ASSISTANCE**	Effective Date 01/01/2016
Section: Patient Financial Services	Revised Date: 4/17/2017, 12/4/2017, 3/7/2019, 10/15/2019, 11/19/2019, 1/1/2021, 1/1/2022, 1/1/2023, 10/12/2023, 1/1/2024, 1/1/2025, 1/1/2026, 7/16/2026

PURPOSE AND SCOPE:

The purpose of this policy is to establish standard procedures for the determination of financial assistance to patients of Nationwide Children's Hospital (Nationwide Children's) and its Affiliated Entities that are in financial need. This policy sets forth a process for Patient Accounts Department staff, other hospital personnel, and External Vendors' representatives to identify those patients and families who are eligible for free or discounted care. Nationwide Children's Patient Accounts Department has the final authority for determining whether an individual is eligible for financial assistance and for determining that reasonable actions have been taken prior to Nationwide Children's engaging in Extraordinary Collection Actions. Eligibility for financial assistance applies to all patients regardless of race, color, creed, ethnicity, national origin, age, sex, sexual orientation, gender identity, religion, or disability.

The services covered by this policy include all emergency and other Medically Necessary Care provided by Nationwide Children's and its Affiliated Entities.

Nationwide Children's will provide, without discrimination, care for emergency medical conditions to individuals regardless of whether they are eligible for financial assistance. Nationwide Children's shall comply with the Emergency Medical Treatment and Labor Act (EMTALA) by providing medical screening examinations and stabilizing treatment and referring or transferring an individual to another facility, when appropriate, and providing emergency services in accordance with 42 CFR 482.55 (or any successor regulation). Nationwide Children's prohibits any actions that would discourage individuals from seeking emergency medical care, such as by demanding that emergency department patients pay before receiving treatment for emergency medical conditions or by permitting debt collection activities that interfere with the provision, without discrimination, of emergency medical care.

DEFINITIONS:

Affiliated Entities – Affiliated companies owned by Nationwide Children's Hospital that provide emergency and other Medically Necessary Care in the hospital including Children's Anesthesia Associates, Children's Radiological Institute, Children's Surgical Associates, Pediatric Academic Association, and Pediatric Pathology Associates of Columbus. Although Children's Community Practices does not provide patient care in the hospital, it is owned by Nationwide Children's Hospital and offers financial assistance in accordance with this policy.
Amounts Generally Billed (AGB) – Amounts generally billed by Nationwide Children's to patients with insurance.
External Vendors – Companies hired to act as agents with respect to billing and collection.
Extraordinary Collection Actions – Actions taken by Nationwide Children's against an individual related to obtaining payment of a bill for care covered under this Financial Assistance Policy set forth in 26 CFR 1.501(r)-6(b) (or any successor regulation).
Family Size - Shall include the patient, the patient's spouse, regardless of whether the spouse lives in the home, and all of the patient's children, natural or adopted, under the age of eighteen who live in the home. If the patient is under the age of eighteen, the "family" shall include the patient, the patient's natural or adopted parent(s) (regardless of whether they live in the home), and the parent(s)' children, natural or adopted under the age of eighteen who live in the home.
FAP – This Financial Assistance Policy.

Federal Poverty Level (FPL) – A measure defined by the United States government based on annual income and household size to indicate poverty threshold.
Gross Charges – Amounts charged for medical care.
Gross Income - Total income before any deductions are taken.
Income – Includes all sources of income including, but not limited to gross wages, rental income, unemployment compensation, social security benefits, and public assistance.
Medically Necessary Care – Health-care services or supplies needed to prevent, diagnose, or treat an illness, injury, condition, disease, or its symptoms and that meet accepted standards of medicine.
Patient Responsibility – Amount that an individual is responsible for after all insurance (including commercial and governmental payors) payments, deductions, and discounts have been applied to a patient's bill.

INSTRUCTIONS:

Eligibility Criteria

Any patients receiving or seeking to receive emergency or other Medically Necessary Care at Nationwide Children's may apply for financial assistance; however, the criteria used to evaluate eligibility may differ based on where the patient resides in the event a patient is seeking non-emergent care.

Ohio residents requesting financial assistance will be encouraged, but not required, to first apply for governmental assistance available including, but not limited to, Ohio Medicaid (Healthy Start and Healthy Families), the Ohio Hospital Care Assurance Program (HCAP), and Alcohol, Drug and Mental Health (ADAMH) Board assistance. Ohio residents exempt from Social Security and Medicare taxes must supply a completed form 4029 "Application for Exemption From Social Security and Medicare Taxes and Waiver of Benefits" in order to waive this requirement. Patients who are Ohio residents but do not qualify to receive benefits under these programs and patients who are not Ohio residents that receive emergency medical care at Nationwide Children's may be eligible for financial assistance based on total Gross Income and Family Size as follows:

- Income at 200% or less of the Federal Poverty Level (FPL) will be written off at 100% of the Patient Responsibility.
- Income between 201% and 250% of the FPL will be written off at 80% of the Patient Responsibility.
- Income between 251% and 300% of the FPL will be written off at 60% of the Patient Responsibility.
- Income between 301% and 400% of the FPL will be written off at 45% of the Patient Responsibility.

Ohio residents with family income greater than 200% of the FPL but less than 450% of the FPL whose bills from Nationwide Children's exceeds 20% of the family yearly household income will be considered medically indigent for purposes of this policy. Medically indigent families will be eligible for a higher discount in the Patient Responsibility in an amount such that the family's Patient Responsibility for all Nationwide Children's bills equals a percentage (%) of the family's yearly household income as stated below:

- Income at 200% or less of the Federal Poverty Level (FPL) will be written off at 100% of the Patient Responsibility.
- Income between 201% and 250% of the FPL will be written off to a balance equal to 5% of the family's yearly household income.
- Income between 251% and 300% of the FPL will be written off to a balance equal to 7% of the family's yearly household income.
- Income between 301% and 450% of the FPL will be written off to a balance equal to 10% of the family's yearly household income.

Non-Ohio U.S. residents requesting financial assistance for non-emergent medical care must be pre-approved for financial assistance prior to receiving such non-emergent care. The pre-approval process will require the individual to submit medical justification for the services to take place at Nationwide Children's versus a healthcare facility in the patient's state of residence. Such justification will be reviewed by Nationwide Children's and patients determined by Nationwide Children's to have submitted appropriate medical justification may be eligible for financial assistance based on total Gross Income and Family Size as follows:

- Income at 200% or less of the Federal Poverty Level (FPL) will be written off at 100% of the Patient Responsibility.
- Income between 201% and 250% of the FPL will be written off at 80% of the Patient Responsibility.
- Income between 251% and 300% of the FPL will be written off at 60% of the Patient Responsibility.
- Income between 301% and 400% of the FPL will be written off at 45% of the Patient Responsibility.

Non-US residents requesting financial assistance for non-emergent care must be pre-approved for financial assistance prior to receiving such non-emergent care in accordance with Nationwide Children's Policy and Procedures for International Charity Patients. Nationwide Children's Steering Committee for International Patients determines an international patient's eligibility for charity care based upon several criteria, including the medical intervention needed, the likelihood of the intervention successfully resolving the underlying medical condition and being properly managed post-intervention, whether Nationwide Children's is uniquely able to provide such intervention, the availability of such services within the patient's country of residence, budgetary restrictions, and such other criteria as the Steering Committee may determine are appropriate to ensure Nationwide Children's charity care resources for international cases are used most efficiently and effectively. Information about the availability of charity care for international patients is available by contacting the Nationwide Children's Welcome Center.

Medicaid recipients who receive Medically Necessary Care not covered by Medicaid will have 100% of the Patient Responsibility for such Medically Necessary Care automatically written off. An application for financial assistance will not be required in these circumstances.

Families who provide to Nationwide Children's Patient Accounts Department a completed IRS Form 4029 or other documentation satisfactory to Nationwide Children's that confirms that the family has waived its right to government benefits because of the family's religious affiliation will be eligible for a discount of the Patient Responsibility equal to that provided under this FAP to those with income between 301% and 400% of the FPL. An application for financial assistance will not be required in these circumstances.

Notwithstanding the foregoing, for services provided at a Nationwide Children's Hospital location that serves as a National Health Services Corps (NHSC) site, which are identified on Attachment 1 hereto, eligibility for financial assistance will be based only on the family's size and income (without regard to residency status) and will be provided on the sliding scale set forth on Attachment 1.

Families with the address of a "Homeless Shelter" will be eligible for a 100% discount of the Patient Responsibility. An application for financial assistance will not be required in these circumstances.

Nationwide Children's Patient Accounts Department shall have the final authority for determining eligibility for financial assistance under this policy.

Basis for Calculating Amounts Charged to Patients

The amounts charged to patients eligible for financial assistance under this FAP for emergency and Medically Necessary Care will not exceed AGB. Nationwide Children's calculates AGB using the "Look-Back" method, as defined in federal regulations, based on all claims allowed by Medicare fee-for-service and all private health insurers over a 12-month period, divided by Nationwide Children's Gross Charges for those claims. Nationwide Children's updates its AGB calculation on January 1 of each year using data from the 12-month period ending on the September 30 immediately preceding that January 1. For calendar year 2026, AGB equals 78.6%.

An individual eligible for financial assistance is charged only the amount that he or she is personally responsible for paying, after all deductions and discounts (including discounts available under the FAP) have been applied and less any amounts reimbursed by insurers (including both commercial and governmental payors).

Method for Applying for Financial Assistance

To be considered for financial assistance, the individual must apply for financial assistance with the Nationwide Children's Patient Accounts Department. Individuals who seek financial assistance under this Policy at the 100% discount level (i.e. individuals whose family income is 200% or less of the FPL) must complete a Financial Assistance Application and provide the information and documentation listed in the Financial Assistance Application. Electronic signatures on the

application are acceptable. All other applicants may provide the necessary information to the Patient Accounts Department over the telephone, a paper application will not be required. Nationwide Children's reserves the right to request copies of pay checks, W-2's, and income tax returns.

A Financial Assistance Application (whether in writing or telephonically, as set forth above) must be made as follows:

- Outpatient hospital services for patients at or below 100% of the FPL are covered by HCAP and, as such, require a new application every 90 days from the initial date of service. Outpatient hospital services for all other patients require a new application every 180 days from the initial date of service. Recipients of the Disability Assistance (DA) program or its successor program under HCAP must submit a new application on a monthly basis.
- Each inpatient admission, unless the patient is admitted within 45 days of discharge for the same underlying condition, must be on its own financial assistance application. Subsequent readmissions can be on the same application, but only if within 45 days and for a related condition. Outpatient accounts can be added to an application that has an inpatient account, but an inpatient visit cannot be added to an application that has outpatient accounts.

Nationwide Children's does not use prior FAP eligibility determinations to determine whether an individual qualifies for financial assistance under this policy.

Presumptive Eligibility for Financial Assistance
Nationwide Children's Hospital may use a third party to conduct a review of patient information to assess FAP-eligibility for the most generous assistance available under the FAP. This review and analysis utilizes a health care industry recognized, predictive model. Such reviews will not be used to determine presumptive eligibility for less than the most generous assistance available under the FAP.

Actions That May Be Taken in the Event of Nonpayment

Nationwide Children's will make every attempt to collect on the debt and make reasonable efforts to determine if an individual is FAP eligible before engaging in Extraordinary Collection Actions. Such reasonable efforts will include sending out statements and making phone calls to the responsible party on the schedule set forth below during the first 120 days of discharge. Nationwide Children's may use the services of an External Vendor to assist in debt collection.

0 - 30 days	First billing statement sent, along with written notice that financial assistance is available, the FAP application form, and how the individual may obtain assistance with the FAP application process.
31- 60 days	Second billing statement sent, along with a plain language summary of the FAP and a notice that Nationwide Children's intends to report the unpaid account to a credit bureau if such amounts are not paid within 365 days from the first post-discharge billing statement. In addition, one phone call is made to verbally notify the individual about Nationwide Children's FAP and how the individual may obtain assistance with the FAP application process.
61 - 90 days	Third billing statement sent, along with a plain language summary of the FAP and a notice that Nationwide Children's intends to report the unpaid account to a credit bureau if such amounts are not paid within 365 days from the first post-discharge billing statement. In addition, one phone call is made to verbally notify the individual about Nationwide Children's FAP and how the individual may obtain assistance with the FAP application process.
91 - 120 days	Fourth billing statement sent, along with a plain language summary of the FAP and a notice that Nationwide Children's intends to report the unpaid account to a credit bureau if such amounts are not paid within 365 days from the first post-discharge billing statement. In addition, two phone calls are made to verbally notify the individual about Nationwide Children's FAP and how the individual may obtain assistance with the FAP application.

In addition to written notice that financial assistance is available, the FAP application form, and information about how the individual may obtain assistance with the FAP application process, all billing statements will include the direct website address where copies of the FAP, FAP application form, and plain language summary of the FAP may be obtained.

Nationwide Children's may report unpaid accounts to the credit bureau after 1 year from the initial billing statement date. If an individual's bills are aggregated to cover multiple episodes of care, an unpaid account will not be reported to a credit bureau until at least 120 days after the first post-discharge billing statement for the most recent episode of care included in the aggregation.

If an individual submits an incomplete FAP application during the application period (i.e. the 240 days following the first post-discharge billing statement), Nationwide Children's shall provide the individual with a written notice that describes the additional information and/or documentation required under the FAP or FAP application form that must be submitted to complete the FAP application as well as contact information for the Nationwide Children's department that can provide information about the FAP and that can provide assistance with the application process. Nationwide Children's will suspend any Extraordinary Collection Action (and, if applicable, inform its External Vendors to suspend such efforts) until Nationwide Children's has determined whether the individual is eligible for financial assistance under the FAP or the individual fails to respond to requests for additional information and/or documentation within a reasonable period of time.

Upon receipt of a complete FAP application during the application period, Nationwide Children's will make a determination as to whether the individual is FAP-eligible for the care and notify the individual in writing of this eligibility determination (including, if applicable, the assistance for which the individual is eligible) and the basis for this determination. If the individual is determined to be eligible for assistance other than free care, Nationwide Children's will:

- Provide the individual with a billing statement that indicates the amount the individual owes for the care as a FAP-eligible individual and how the amount was determined. Such billing statement will also describe how the individual can obtain information regarding the AGB for the care.
- Refund to the individual any amount he or she has paid for the care that exceeds the amount he or she is determined to be personally responsible for paying as a FAP-eligible individual.
- Take all reasonably available measures to reverse any Extraordinary Collection Actions taken against the individual to obtain such payment.

If an individual submits an FAP application and, prior to Nationwide Children's determining whether the individual is FAP-eligible, the individual applies for Medicaid eligibility, Nationwide Children's will postpone determining whether the individual is FAP-eligible, and will not engage in any Extraordinary Collection Actions against the individual, until after the individual's Medicaid application has been completed and submitted and a determination as to the individual's Medicaid eligibility has been made.

List of Providers Who Provide Emergency and Other Medically Necessary Care at Nationwide Children's

A list detailing providers who deliver emergency and other Medically Necessary Care at Nationwide Children's and whether their professional services are covered by Nationwide Children's FAP may be viewed at http://www.nationwidechildrens.org/financial-assistance, or a paper copy may be obtained by contacting the departments listed below under Contact Information.

Availability of the Financial Assistance Policy, Plain Language Summary of the Financial Assistance Policy and Financial Assistance Application

Web Site Access
https://www.nationwidechildrens.org/your-visit/billing-and-insurance/financial-assistance
Paper Copies

- Available upon request at no charge to the patient or responsible party.
- Paper copies are offered at intake in any admissions or registration areas on Nationwide Children's main campus (including the Emergency Room) and offsite locations.
- Letters and Financial Assistance Applications are mailed to the patients and/or parents upon request.
- All billing statements contain the Financial Assistance Application on the back of the statement as well as contact information for the department that can provide assistance with the application.

Notification and Information Provided to Hospital Facility Patients

- Signage located in any admissions or registration area on Nationwide Children's main campus (including the Emergency Room) and offsite locations to advise the patients or the responsible party of the availability of financial assistance.
- Automated telephone calls offering financial assistance that are made after the second billing statement is issued.
- Nationwide Children's Financial Counselors visit patients with need for financial assistance in their rooms or in the clinics.

Notifying and Informing the Broader Community

- The FAP, Plain Language Summary of the FAP and the Financial Assistance Application can all be found at www.NationwideChildrens.org.
- Nationwide Children's also periodically shares the Plain Language Summary of the FAP and the Financial Assistance Application with Federally Qualified Health Centers in Franklin County and also to community-based physicians who are members of the Nationwide Children's medical staff so that the documents are readily available to patients of these providers.

Translated Documents

- The Financial Assistance Policy, Financial Assistance Application, and Plain Language Summary of the FAP will be available in the language spoken by each limited English proficiency (LEP) language group that constitutes the lesser of 1,000 or 5 percent of Franklin County or others reasonably likely to be affected by Nationwide Children's. The Director of Patient Accounts will be responsible for reviewing the language needs on an annual basis and making translated versions of the documents available as needed.

Contact Information

Counselors	Location	Phone
Nationwide Children's Financial Counselors	Admitting Office 700 Children's Drive or by appointment at any Nationwide Children's locations	**(614) 722-2070**
Nationwide Children's Customer Service	Patient Accounts Phone Calls Only	**(614) 722-2055**

The undersigned approves this limited administrative revision to Attachment 1 (addition of an NHSC site) pending ratification by the Budget, Finance and Audit Committee at its next scheduled meeting:

Nelson Weichold
Chief Financial Officer

7/14/26
Date

Attachment 1

Nationwide Children's Hospital locations serving as National Health Service Corps (NHSC Sites):

- Nationwide Children's Hospital – Hilltop Primary Care Center, located at 2857 W. Broad St., Columbus, OH 43204
- Nationwide Children's Hospital – Westside Primary Care Center, located at 441 Industrial Mile Rd., Columbus, OH 43228
- Nationwide Children's Community Dental, ID 8824118297, located at 2900 Inspire Dr, Columbus, OH 43224
- Downtown Primary Care-Nationwide Children's, ID 5049039152, located at 380 Butterfly Gardens Dr, Columbus, OH 43215
- Ft. Hayes School-Based Health Center, ID 4381469266, located at 468 Cleveland Avenue, Columbus, OH 43215
- Mt. Vernon School-Based Health Center, ID 6889084140, located at 300 Yellow Jacket Drive, Mt. Vernon, OH 43035
- Nationwide Children's Hospital Dental Clinic, ID 8508021858, located a 380 Butterfly Gardens Dr., Columbus, OH 43215
- West High School School-Based Health Center, ID 5140715017, located at 179 S. Powell Avenue, Columbus, OH 43204
- South High School School-Based Health Center, ID 4501922318, located at 1160 Ann St., Columbus, OH 43206
- Near East Primary Care, ID 9332228635, located at 1125 East Main Street, Columbus, OH 43205
- East High School School-Based Health Center, ID 4377185057, located at 1500 E. Broad St., Columbus, OH 43205
- KIPP Columbus School Based Health Center, ID 3356055526, located at 2800 Inspire Drive, Columbus, Ohio 43224

Sliding scale discount available for services provided at above locations:

- Income at 200% or less of the Federal Poverty Level (FPL) will be written off at 100% of the Patient Responsibility.
- Income between 201% and 250% of the FPL will be written off at 80% of the Patient Responsibility.
- Income between 251% and 300% of the FPL will be written off at 60% of the Patient Responsibility.
- Income between 301% and 400% of the FPL will be written off at 45% of the Patient Responsibility.