



APPENDIX 1

Plain Language Summary of Financial Assistance Policy (FAP)

As part of its mission, Aspire Health Partners provides financial assistance for emergencies and other medically necessary care to patients who lack the ability to pay for hospital services. This policy summary aims to establish a plain-language guide for evaluating and accepting applicants for financial assistance.

Determination of the ability to pay may take into account a number of financial variables, including but not limited to:

- a. The earning status and potential of the patient's household/family
- b. Other sources of income
- c. Household/Family size
- d. The Financial Assistance Application and the required documents

A printed free copy, including a Spanish translation, of the FAP, Plain Language Summary, and application can be obtained on our website at <https://rb.gy/byiii6>

Printed copies may also be obtained at 5151 Adanson Street, Orlando, FL 32804, or by calling 407-875-3700 and requesting it be mailed.

Aspire Health Partners will charge a person for emergency or other medically necessary care who qualifies under the FAP less than the amounts generally billed for emergency or other medically necessary care to individuals who have insurance covering such care.

Financial assistance discounts will be available only for emergencies or other medically necessary healthcare services provided to persons who meet the financial and documentation criteria defined in the FAP policy. This definition also includes any established client receiving services in a federal government, State of Florida, Central Florida Cares Health System, or other county-funded Aspire Health Partners, Inc. program.

Uninsured or underinsured patients with a household income at or below 150% of Federal Poverty Guidelines (FPG) may receive free care (a 100% discount.). Based on the current sliding fee scale, individuals with annual household incomes between 151% and 300% FPG will be eligible for a discount for standard charges. This schedule is updated annually to the currently published Federal Poverty Guidelines. The discount will be applied to our fee schedule for those that qualify.

For information regarding our Financial Assistance Policy, Financial Assistance Application Form, Billing, and Collections, or assistance with the application process, please contact Patient Accounts at (407) 875-3700, extension 6310, or 6302 to speak with a Patient Accounts supervisor.

Financial assistance will be considered at any point in the billing cycle, up to 240 days from the 1st billed date, post-discharge date, or date of service.