

APPENDIX B

FAP PLAIN LANGUAGE SUMMARY

Sparrow Health System, in accordance with Section 501(r) of the Patient Protection and Affordable Care Act of 2010 has established a Financial Assistance Policy.

Patients and/or Responsible Parties with balances owed to Sparrow Health System may be eligible for Financial Assistance based on a combination of family size and household income as compared to United States Federal Poverty Guidelines. Uninsured patients will qualify for either free care or discounted care. Insured patients may qualify for discounts on their deductible, coinsurance or copays owed.

Sparrow Health System will make reasonable efforts to determine a party's eligibility for Financial Assistance before attempting any Extraordinary Collection Actions.

The complete Financial Assistance policy, application, and collection policy can be viewed at <https://www.sparrow.org/patient-resources/financial-resources/financial-assistance>

FAP- eligible individual may not be charged more than the amount generally billed for emergency or other medically necessary care.

Individuals can also request a copy of the policy and an application from Sparrow Patient Financial Services

By phone at:
517-364-7999

In Person at:
3301 E. Michigan Ave., Suite A
Lansing, MI 48912