



GOSHEN HEALTH SYSTEM

True.Care.

Goshen General Hospital Mission and Values Statements

The mission of the Goshen General Hospital is to improve the health of our communities by providing innovative, outstanding care and services, through exceptional people doing exceptional work.

COMPASSION – and commitment to serve with empathy
ACCOUNTABILITY – with integrity and action
RESPECT – through treating others as you wish to be treated
EXCELLENCE – in all we do

Board Approved 1/17/01; Reaffirmed 9/28/05

Goshen General Hospital Vision Statement

Building upon our heritage and values, Goshen General Hospital will deliver exceptional healthcare in an integrated model to the communities we serve, achieving preeminence with commitment to quality, leadership and innovation.

- Lead the region with our Cancer services.
- Create an environment in which each colleague can fulfill his or her professional and/or personal mission.
- Emphasize the benefits of health and wellness.
- Respond strategically to the evolving health needs of our community.
- Become the genesis for creating a new economic base in the greater Goshen community.

Board Approved 10/27/09
Amended: 1/8/10

A Clarian Health Partner

11/2/2011

IU Health Goshen Hospital

Complete Summary - Unclassified Including Non Community Benefit (Medicare and Bad Debt)

For period from 1/1/2010 through 12/31/2010

*Expenses or Revenues equal to zero. Click Options/Org Defaults/Reporting Unit/Edit and edit 'Operating Expenses' and/or 'Operating Revenues'.

	Persons	Total Expense	Offsetting Revenue	Net Benefit	% of Organization Expenses	Revenues
Traditional Charity Care	0	2,421,842	0	2,421,842	Undefined*	Undefined*
Unpaid Cost of Medicaid	0	14,774,478	7,405,902	7,368,576	Undefined*	Undefined*
Community Health Improvement Services	32,820	448,638	0	448,638	Undefined*	Undefined*
Health Professions Education	414	105,951	0	105,951	Undefined*	Undefined*
Research	0	223,264	0	223,264	Undefined*	Undefined*
Financial and In-Kind Contributions	0	246,035	0	246,035	Undefined*	Undefined*
Community Building Activities	91	93,569	0	93,569	Undefined*	Undefined*
Community Benefit Operations	25	3,993	0	3,993	Undefined*	Undefined*
Totals - Community Benefit	33,350	18,317,770	7,405,902	10,911,868	0.0	0.0
Unpaid Cost of Medicare	0	38,907,373	32,177,971	6,729,402	Undefined*	Undefined*
Totals with Medicare	33,350	57,225,143	39,583,873	17,641,270	0.0	0.0
Bad Debt	0	7,214,208	0	7,214,208	Undefined*	Undefined*
Totals with Bad Debt	33,350	25,531,978	7,405,902	18,126,076	0.0	0.0
Totals Including Medicare and Bad Debt	33,350	64,439,351	39,583,873	24,855,478	0.0	0.0



Indiana University Health

Indiana University Health Goshen Mission and Values Statements

The mission of the Indiana University Health Goshen is to improve the health of our communities by providing innovative, outstanding care and services, through exceptional people doing exceptional work.

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Board Approved 01/17/01; Reaffirmed 09/28/05

Indiana University Health Goshen Vision Statement

Building upon our mission and values, Indiana University Health Goshen will deliver exceptional healthcare in an integrated model to the communities we serve, achieving preeminence with commitment to quality, leadership, and innovation. By 2015, we will achieve all elements of this vision by focusing on the following key areas:

- Lead the region with our Cancer services.
- Create an environment in which each Colleague can fulfill his or her personal and/or professional mission.
- Emphasize the benefits of health and wellness.
- Respond strategically to the evolving health needs of our community.
- Become the genesis for creating a new economic base in the greater Goshen community.

Board Approved 7/29/09

Goshen General Hospital Administrative Manual

Page 1 of 5

Subject: Payment and Assistance Options	Approval Date: 11/22/2005
Initiator: Chris Wert Director, Patient Financial Services	Approval: Name: Amy Floria <i>Title: Chief Financial Officer</i>
JCAHO Standard: RI.1.30	Review Date: 9/20/2010 Revised Date: 10/5/2010

POLICY:

It is the policy of Goshen General Hospital to grant indigent allowances or hardship adjustments to those patients incapable of paying for their personal medical care and who are unable to qualify for financial assistance through federal and state government assistance programs. No patient will be denied access to appropriate care based upon his or her ability to pay for non-elective services.

SCOPE:

To further the mission of Goshen Health System and to strengthen our patient, community and physician relationships, Goshen General Hospital has developed discounting practices for the uninsured and underinsured patients. Some patients may be capable of paying only a portion of their hospital bill as they do not have the financial resources available. Other patients may receive hospital care where the hospital is unable to assess the patient's capability to pay, such as the homeless or transients, or may not have the ability to earn an income such as the incarcerated, and some patients seek relief from their financial responsibility by filing personal bankruptcy action through a U.S. Bankruptcy Court.

DEFINITION:

Charity care is care rendered without anticipation of payment. Charity care, as defined by Goshen General Hospital, is broken down into four segments – indigent allowances, hardship adjustments, free care, and bankruptcy.

Indigent allowance: an allowance which represents a write-off of the entire balance on a patient's account. An indigent allowance represents a situation where the hospital determines either the patient is incapable of paying any portion of their bill and is also not able to qualify for financial assistance through any other type of program or the patient has no capacity to earn an income.

Hardship adjustment: an adjustment which lowers a patient's account balance by a specific amount as determined by their ability to pay. An account adjustment for hardship will always leave a balance on the account which the patient is expected to be capable of paying.

Free care: an allowance which represents a write-off of the balance on a patient's account. While this category is an extension of the definition of indigent allowance above, this classification represents a situation where the hospital is unable to determine a patient's capability to pay their hospital bill. Exceptions are those situations where there is reason to

believe that the patient has demonstrated an unwillingness to pay by withholding payment source information or complete the information necessary for the billing process.

Bankruptcy: an allowance which represents a write-off of the entire balance on a patient's account. The hospital recognizes the decision for the U.S. Bankruptcy Court, which attests to a patient's inability to pay their hospital bill when our billing is a listed liability for the Bankruptcy.

Charity Care (Financial Assistance)

Patients who do not qualify for Medicaid or Healthcare for the Indigent (HCI) program due to income levels above 100% of the Federal poverty guidelines are eligible for the Goshen General Hospital Financial Assistance Program. To qualify, the patient must meet the Goshen General Hospital income guidelines as described for medically necessary services (i.e.: excluding such elective, not medically services as infertility services, cosmetic surgery, as well as special discounted pricing packages such as maternity care – OB Special Delivery Package). Charity Care/Financial Assistance adjustments are offered on a sliding scale basis up to 400% of federal poverty guidelines.

Patients may apply for the Goshen General Hospital Charity Care by completing the Financial Assistance Application form attesting to their family size and income, and meeting other eligibility requirements. Goshen General Hospital's Charity Care will be offered to patients in our service area to include:

Indiana Residents residing in our "Total Service Area" as defined by the Marketing Department.

Michigan Residents residing in the following counties: Cass, Berrien, Branch, St. Joseph.

The Financial Assistance application form will be provided to appropriate patients during their hospital stay or outpatient encounter. The application is also provided to patients on our Goshen Health System website. Patients will be encouraged to complete the form at or before the time of service or as soon as possible thereafter.

Financial Assistance write off's will be authorized and administered by the Patient Financial Services Department based on the information supplied on the Financial Assistance application form. The application forms will be retained in the Financial Advocate's office for audit purposes.

Additional Funding

This policy affirms that Goshen General Hospital continues to assist patients in seeking additional funding sources to settle outstanding hospital claims. This goes beyond the traditional sources of Indiana Medicaid and HCI.

Goshen General Hospital will maintain a list of state, federal, local, and philanthropic sources to assist patients in securing payment for their outstanding hospital debt.

Hospital Financial Assistance Programs include the following but are not limited to the following:

- Hoosier Healthwise, Children's Health Insurance Program (CHIP), Goshen General Hospital Financial Assistance Program, Medical Indigence Program (HCI), State Funded Community Health Center Program, Community Services Block Grant (CSBG), Mental Health Services, First Steps, and Medicaid Select.
- Income based hospital discounts (requires completion of a Financial Assistance application)

Indiana Breast and Cervical Cancer Program

This program is sponsored by the Indiana Department of Health to provide payment for screening and diagnostic services provided to women with no insurance coverage for the prevention of or diagnosing of breast or cervical cancer. Patients must be enrolled in the program and receive an identification card that must be presented at the time of service. Covered services are limited.

OB Contract

Patients delivering at Goshen General Hospital that do not have maternity insurance coverage may qualify for care under the OB Special Delivery Package. The agreement offers a package rate for delivery services and must be paid prior to discharge.

Victims of Crimes

Any patient who has been injured as a result of a crime against them and has no other means of coverage may be eligible for compensation through the Indiana Special Crimes Fund.

Indiana Medicaid Programs

- Hoosier Healthwise for pregnant women
- Hoosier Healthwise for ages newborn up to 15th birthday
- Children's Health Insurance Program (CHIP) for 15 years of age up to the 19th birthday
- Children's Health Insurance 2 (CHIP 2) for ages newborn up to the 19th birthday
- Select - Medicaid for the Aged (65 or over), Blind or Disabled (unable to work for 12 consecutive months or longer or already found disabled by the Social Security office)
- Package E (Alien Emergency Medical Assistance) for non-US citizens. Covers only life threatening situations and birthing expenses
- Qualified Medical Benefits (QMB), secondary to Medicare, covers only Medicare co-insurance and deductible

Payment Options

Goshen General Hospital policy is to provide patients with outstanding financial obligations multiple payment options to expedite the resolution of their account balance. It is Goshen General Hospital's intent to establish a policy and appropriate procedures by which a patient or guarantor can make a payment or an acceptable payment arrangement. Goshen General Hospital's policy also allows for patient's financial obligation to be collected before or upon admission for scheduled services or at the time service is rendered for outpatients and will also account for any requirements necessary for Federal, State, and Local laws (i.e. Emergency Medical Treatment and Active Labor Act -- aka EMTALA).

Goshen General Hospital reinforces that the patient/guarantor is primarily responsible for payment of the hospital bill even though patients may have health insurance, with the exception

of approved Medicare, Medicaid and Health Maintenance Organization (HMO) services. Goshen General Hospital's patients will be given multiple payment options for the payment of all balances due on their account.

Uninsured:

In an attempt to grant our uninsured patients a discounted rate for services, which is comparable to our managed care discounts, our uninsured patients will receive a 20% discount on all services. This discount will be automated through Meditech with the proration processes. Payment on the remaining balance is expected before or on the day treatment is rendered. Patients may pay by any means listed in the following Payment Options section. Goshen General Hospital will offer an additional 10% for all account balances that are paid in full within 30 days of the first billing. **This additional discount will not apply to balances paid in full through any hospital-sponsored bank loan option.

Insured:

Patients will need to pay their deductible, co-pay and any out-of-pocket portions at the time of service by any means listed below in the Payment Options section. Goshen General Hospital will offer a prompt pay discount of 10% for those services which are paid in full within 30 days of the date of insurance payment or denial. **This additional discount will not apply to balances paid in full through any hospital-sponsored bank loan option.

Acceptable payment methods for this policy and procedure are as follows:

Payment Options:

- Cash & Check
- Credit & Debit Card
- Money Orders
- Cashier and Traveler's Checks
- Bank Financing through First Source Bank (discount rate varies from other payment options)
- Hospital Sponsored Payment Plans
- Health Saving Account
- Flexible Spending Account
- Web based payment
- Electronic (E-check)
- Pay by phone (debit & credit cards)

Prompt Pay

Goshen General Hospital will offer the following prompt pay discounts:

- Self-pay (uninsured) will be offered a 10% prompt pay discount for all balances paid in full within 30 days of the first billing. This discount will be provided for any payment option listed above except for any hospital-sponsored bank loan option.
- Self-pay (uninsured) will be offered a 5% prompt pay discount for all balances paid in full within 30 days of the first billing with an approved loan through any hospital-sponsored bank loan option.

- Self-pay balances after insurance processing will be offered a 10% prompt pay discount for all balances paid in full within 30 days of the insurance payment or denial. This discount will be provided for any payment option listed above except for any hospital-sponsored bank loan option.
 - Self-pay balances after insurance processing will be offered a 5% prompt pay discount for all balances paid in full within 30 days of the insurance payment or denial with an approved loan through any hospital sponsored bank loan option.
-

Approval Process for Adjustments

Adjustments made to a patient account require approval based on dollar amount to be adjusted. Approval limits are as follows:

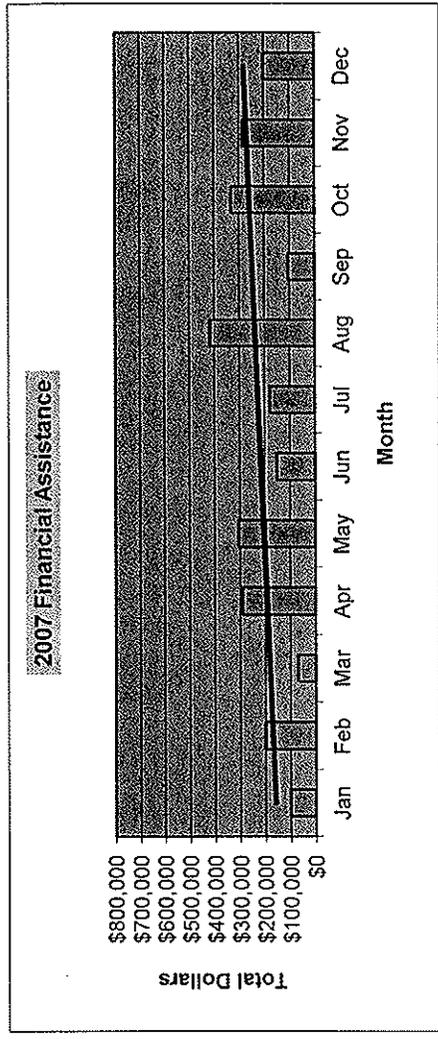
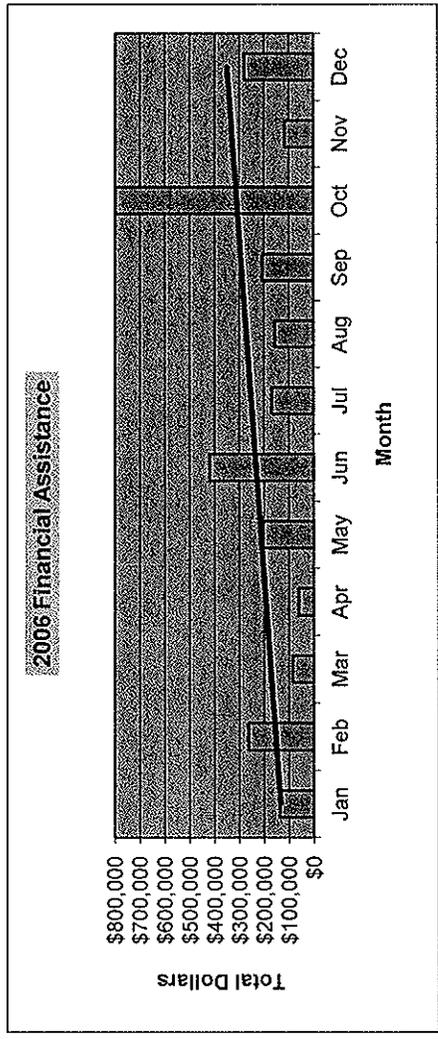
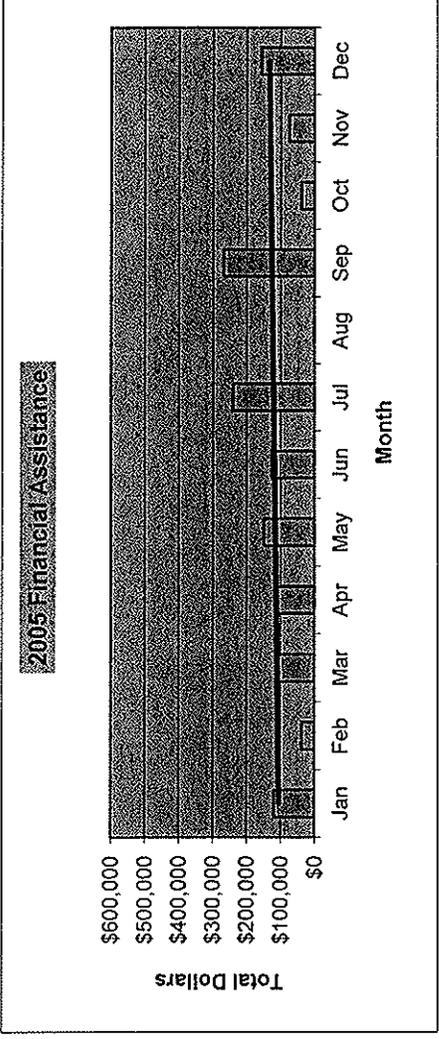
Up to \$2,500: Approval by Manager, Patient Financial Services
\$2,501 - \$25,000: Approval by Director, Patient Financial Services
\$25,001 - \$100,000: Approval by Chief Financial Officer
Balances over \$100,000: Approval by Chief Executive Officer

FORMULATED: 9/05/05
APPROVED: 11/22/05
REVIEWED: 09/20/10
REVISED: 10/05/10

2005	Total \$	# Accts
Jan	\$119,575.36	33
Feb	\$38,086.98	25
Mar	\$106,653.89	50
Apr	\$109,305.64	70
May	\$149,447.16	45
Jun	\$125,468.66	47
Jul	\$241,436.29	41
Aug	\$486.88	-3
Sep	\$269,214.90	130
Oct	\$38,842.05	35
Nov	\$75,138.62	40
Dec	\$157,924.79	117
Totals	\$1,431,581.22	630

2006	Total \$	# Accts
Jan	\$137,035.88	59
Feb	\$262,764.89	141
Mar	\$84,761.83	43
Apr	\$62,421.32	32
May	\$204,149.83	50
Jun	\$420,940.44	96
Jul	\$169,322.02	75
Aug	\$156,393.34	76
Sep	\$207,126.37	84
Oct	\$798,830.40	95
Nov	\$117,421.70	40
Dec	\$279,619.60	74
Totals	\$2,900,787.62	865

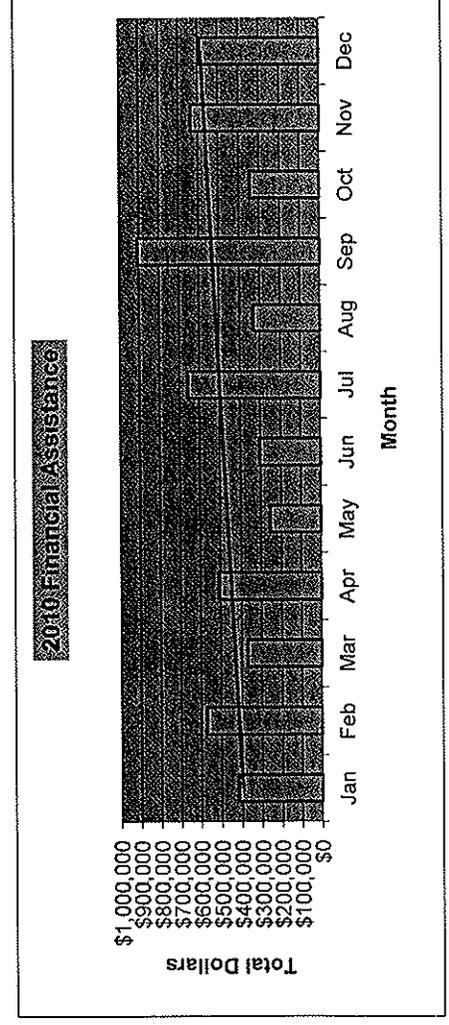
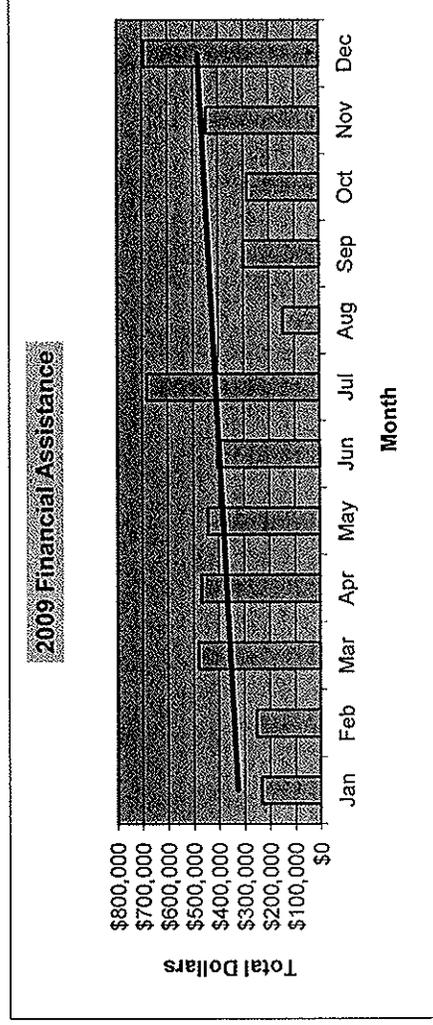
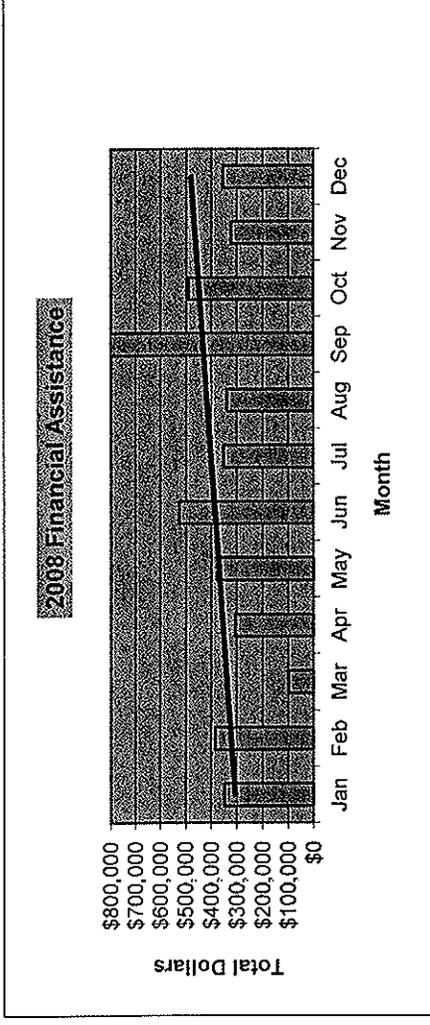
2007	Total \$	# Accts
Jan	\$100,966.28	53
Feb	\$200,605.37	57
Mar	\$71,124.48	53
Apr	\$291,744.06	87
May	\$306,080.40	95
Jun	\$151,353.40	57
Jul	\$179,622.13	62
Aug	\$416,619.04	45
Sep	\$105,730.14	88
Oct	\$331,176.72	108
Nov	\$288,200.26	58
Dec	\$201,730.60	73
Totals	\$2,644,952.88	836



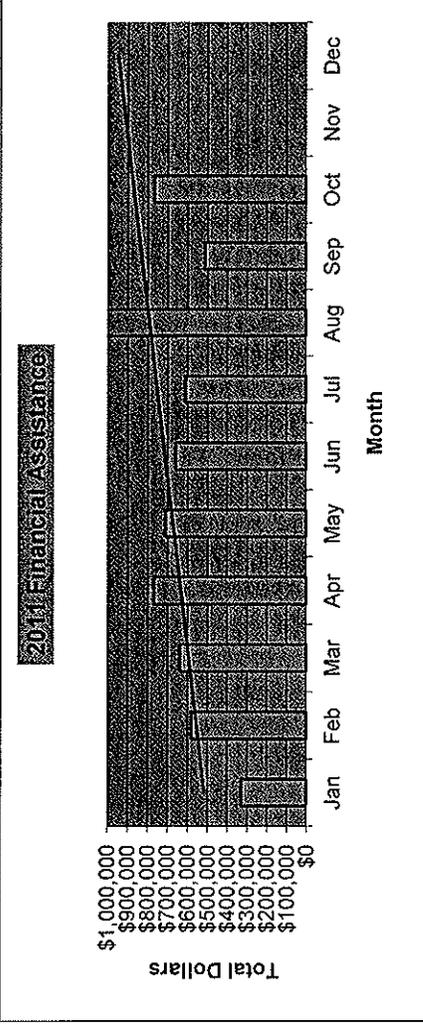
2008	Total \$	# Accts
Jan	\$347,451.30	76
Feb	\$385,103.70	95
Mar	\$98,108.87	93
Apr	\$305,742.35	120
May	\$375,857.40	267
Jun	\$526,523.32	235
Jul	\$352,180.22	163
Aug	\$339,289.74	243
Sep	\$819,297.14	293
Oct	\$490,211.27	341
Nov	\$323,184.19	281
Dec	\$356,417.59	263
Totals	\$4,719,367.09	2470

2009	Total \$	# Accts
Jan	\$234,342.37	181
Feb	\$253,456.70	223
Mar	\$480,390.25	207
Apr	\$468,914.41	251
May	\$441,779.19	274
Jun	\$404,385.30	205
Jul	\$682,306.43	390
Aug	\$145,678.13	246
Sep	\$300,194.89	264
Oct	\$285,850.68	176
Nov	\$447,888.41	263
Dec	\$692,563.21	297
Totals	\$4,837,749.97	2977

2010	Total \$	# Accts
Jan	\$418,532.97	227
Feb	\$571,157.08	238
Mar	\$369,627.77	249
Apr	\$507,914.29	199
May	\$255,065.42	206
Jun	\$303,680.17	239
Jul	\$657,418.36	268
Aug	\$332,614.08	255
Sep	\$906,598.92	277
Oct	\$345,587.63	233
Nov	\$634,627.73	334
Dec	\$589,735.15	293
Totals	\$5,892,559.57	3018



2011	Total \$	# Accts
Jan	\$328,155.67	252
Feb	\$583,182.21	273
Mar	\$640,266.71	302
Apr	\$766,814.75	347
May	\$710,461.61	351
Jun	\$660,408.41	310
Jul	\$613,499.61	349
Aug	\$1,349,697.95	466
Sep	\$514,015.92	290
Oct	\$765,939.70	243
Nov		
Dec		
Totals	\$6,932,442.54	3183



Goshen General Hospital

Administrative Manual

Page 1 of 5

Subject: Payment and Assistance Options	Approval Date: 11/22/2005
Initiator: Chris Wert Director, Patient Financial Services	Approval: <i>Name:</i> Randal E. Christophel <i>Title:</i> Chief Financial Officer
JCAHO Standard: RI.1.30	Review Date: Revised Date:

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FORMULATED: 9/05/05

APPROVED: 11/22/05

REVIEWED:

REVISED:



GOSHEN HEALTH SYSTEM
True.Care.

Indiana State Department of Health
2 North Meridian Street
Indianapolis, IN 46204
Attn: Matt Doades

Re: Service Areas

Matt,

The primary service area for Goshen Health System is located within the counties of: Elkhart, St. Joseph, LaGrange, Noble, Kosciusko, Marshall and Whitley. Major cities and towns included in this primary area are: Goshen, Elkhart, Middlebury, Nappanee, South Bend, Mishawaka, Lagrange, Shippshewana, Ligonier, Warsaw, Syracuse, North Webster, Milford, Plymouth and Columbia City.

Jerry Stoner, MBA
Director of Finance