



DEPARTMENT: ADMINISTRATION

NUMBER: P-21

EFFECTIVE DATE: 02/19

SUBJECT: Business Services –
Financial Assistance Program

SUPERSEDES: 5/05, 5/07, 8/09, 4/11,
3/12, 6/14, 1/16, 5/16,
2/17, 3/18

PURPOSE:

St. Luke's is committed to providing financial assistance to persons who have health care needs and are uninsured, underinsured, ineligible for government programs, or otherwise unable to pay. St. Luke's strives to ensure that the financial capacity of people who need health care services does not prevent them from seeking or receiving care.

POLICY STATEMENT:

St. Luke's will provide low-income individuals with financial assistance based on current Federal Poverty Guidelines.

DEFINITION:

Amounts Generally Billed (AGB) Limit: The average amount collected by St. Luke's for providing emergency and other appropriate hospital-based medical services to individuals who have insurance covering that service, as defined in IRS Reg. 1.501(r)-1(b)(1).

Assets: Assets that will be considered liquid include those that could be converted to cash within one year. These include checking accounts, savings accounts, retirement funds, trust funds, and other investments. Additionally, countable assets include the liquidated value of luxury items such as recreational vehicles and second homes. In lieu of liquidating the assets, they may be counted as current year's income in the financial assistance eligibility determination.

Attorney General Agreement (AGA): An agreement between St. Luke's and the Minnesota Attorney General's Office relative to billing practices, collection practices, and uninsured patient discounts.

Cosmetic Services: Services provided to reshape normal structures of the body in order to improve the patient's appearance and self-esteem.

Extraordinary Collection Actions (ECAs): Especially aggressive efforts to encourage individuals to pay a liability as defined in IRS Reg. 1.501(r)-6(b). In general, extraordinary collection actions include selling a debt to another party; reporting adverse information about an individual to a consumer credit reporting agency or credit bureau; deferring or

denying medically necessary care because of nonpayment of a previous liability; requiring payment before providing medically necessary care because of nonpayment of a previous liability; and actions that require a legal or judicial process (including liens, foreclosures, attachments, seizures, civil actions, arrests, writs of body attachment, and garnishments).

Family: A household that resides in a defined residence and who are related by birth, marriage or adoption or has no residence but operates together as a unit. The family unit may include parents or other elderly relatives of those in the family unit that are defined as dependents on the Federal Tax return.

Family Income: All income attributable to all members of the family in the defined residence, excluding amounts earned by family members less than twenty-one (21) years of age. The income of a non-related person who lives with the family (housemate or lodger), will not be included in determining family income.

Financial Assistance Program (FAP): A program to provide health care services free or at a discount to individuals who qualify by meeting income and asset guidelines.

Gross Charges: Unadjusted process listed in St. Luke's Hospital charge-master file (CDM).

Income: Includes salaries, wages, self-employment income, payment from Social Security, Supplemental Security Income, public assistance, veteran's payments, survivor benefits, disability payments, unemployment income, workers' compensation, pension or retirement benefits, child support, alimony, interest earnings, dividends, rents, royalties, income from trusts, educational assistance, assistance from outside the household, and income from other sources.

Medically Necessary Services: Services that are reasonable and necessary for the diagnosis or treatment of an illness or injury or to improve the functioning of a malformed body member. Screening services are excluded from the category of medically necessary services.

Plain Language Summary (PLS): A document containing a clear, simple explanation of the financial assistance program and information about eligibility and the application process.

Presumptive Financial Assistance Eligibility: The process of reclassifying financial accounts as financial assistance accounts based on information from publically available and purchased transaction data. An estimate of a guarantor's financial profile creates an estimated household size and household income range and is used to determine financial assistance eligibility.

Underinsured: The patient/guarantor has some level of insurance or third-party assistance but still has expenses that exceed financial abilities.

Uninsured: The patient/guarantor has no level of insurance or third-party to assist with meeting payment obligations.

SUBJECT KEY WORDS:

Amounts generally billed, charity care, extraordinary collection actions, federal poverty guideline, financial assistance, presumptive financial assistance

PROCEDURE:

Uninsured Discount

1. St. Luke's offers discounts to patients who are uninsured and who require medically necessary health care services.
2. St. Luke's will make a reasonable effort to determine whether the patient is eligible for an uninsured service discount for medically necessary services before any collection efforts are initiated.
3. The Uninsured Service Discount will be applied to all self-pay accounts based on 100% of gross charges for services received upon initial billing and will appear on the patient's statement.
4. St. Luke's will not bill an uninsured patient for medically necessary services in an amount greater than what the provider would be reimbursed for that service or treatment from its most favored insurer.
5. If insurance is later added to the account and payment is received, the Uninsured Service Discount will be reversed.
6. The patient has the option of applying for Financial Assistance. If the FAP discount is greater than the Uninsured Discount, the Uninsured Discount will be reversed and the FAP discount will be applied to the account.
7. Patients who receive cosmetic services do not receive an Uninsured Service Discount. These patients must contact a clinic representative to discuss financial arrangements prior to the services being provided.

Patient Financial Assistance – General Guidelines

1. This policy will apply to all patients regardless of race, creed, sex, age, or payer. Reasonable measures will be taken to ensure that any language or hearing barriers are addressed.
2. Financial assistance will be offered to those patients unable to pay all or a portion of their bill.
3. Patient Financial Assistance will be applied to all applicable accounts based on 100% of gross charges for services received upon initial billing and will appear on the patient's statement.
4. Eligibility will be determined on an individual basis and evaluated on an assessment of the patient's and/or family's need, financial resources, and obligations.
5. Financial assistance applies to all types of medically necessary services only. Cosmetic services will not be eligible for financial assistance.

6. Trauma/emergency care will be provided to all patients regardless of their ability to pay. Stabilization of the patient will occur prior to any determination of payment arrangements.
7. In general, financial assistance is intended for residents of St. Luke's primary or secondary market service area. An exception will be made for any patient presenting with an urgent, emergent or life-threatening medical condition.
8. St. Luke's primary market is defined by the 13 zip codes that make up Duluth, Superior, Two Harbors and Cloquet. The zip codes are:

54880	55802	55805	55808	55812
55616	55803	55806	55810	
55720	55804	55807	55811	

9. St. Luke's secondary market comprises all of the zip codes remaining from the 17 counties listed for Minnesota, Wisconsin and Michigan:
 - Minnesota: Koochiching, Carlton, Itasca, St. Louis, Aitkin, Lake, Pine and Cook.
 - Wisconsin: Douglas, Burnett, Bayfield, Washburn, Ashland, Sawyer and Iron.
 - Michigan: Ontonagon and Gogebic
10. Eligibility limits may be adjusted at any time based on St. Luke's overall financial resources.
11. Patients must request financial assistance within the time frames identified in this policy. Lack of timeliness or cooperation on the patient's part will result in normal account collection activity. In some instances presumptive financial assistance eligibility may be applied as outlined in the Presumptive Financial Assistance Eligibility section of this policy.
12. Eligibility assessment may include the use of external publically available data sources that provide information on a patient's or guarantor's ability to pay.
13. Eligibility assessment may include a review of the patient's outstanding accounts receivable for prior services rendered and the patient's payment history.

Patient Financial Assistance – Communication

1. Reasonable efforts will be made to ensure that patients are aware of all financial assistance opportunities available to them including Federal, State, County, City and other private programs. Patients may be given assistance regarding application for any assistance program available to them. Programs and other sources of assistance available to patients include:
 - a. The Health Care Access Office, 4325 Grand Avenue, Duluth MN 55807, 218-722-9650 or 3600 Tower Avenue, Superior WI, 54880, 715-392-1955.
 - b. St. Luke's Hospital (218-249-5340) and Clinics (218-249-6870) can provide assistance. An onsite location for assistance is located at St. Luke's Hospital, Financial Counselor Office, 915 E. 1st St, Duluth MN 55805, First Floor Room 1W-073.
 - c. St. Luke's contracts with an outside patient advocacy agency which may provide assistance to the uninsured patient in applying for certain State and Federal programs.

2. The “Notice of Financial Aid” shall be posted in all major patient registration areas and on St. Luke’s web page at www.slhduluth.com/assistance. In addition, the Notice is available to patients in printed form as a Plain Language Summary.
3. St. Luke’s billing statements will include notification that financial assistance is available under the FAP, the phone number and website the patient can use to obtain information about the FAP, and the application process.
4. St. Luke’s will have the Plain Language Summary (PLS), Financial Assistance Policy(FAP), Billing and Collection Policy and Financial Assistance Program Application available on its website at www.slhduluth.com/assistance. Paper copies of these documents are available upon request and without charge by mail, in the Emergency room and in all admissions areas.
5. A copy of the Plain Language Summary will be offered to patients.
6. St. Luke’s will distribute the PLS to not-for-profit entities working with the uninsured and underinsured population through its partners in the Insure Duluth Coalition.
7. St. Luke’s financial counselors will actively communicate the availability of all financial assistance programs, including the St. Luke’s financial assistance program.
8. A financial counselor will be designated to coordinate financial assistance applications, outreach efforts and help coordinate the financial assistance process. Financial counselors shall understand the financial assistance program and be able to answer any questions.
9. Training and information regarding financial assistance will be provided to all members of the staff that interact with patients. At a minimum, these individuals shall be prepared to refer the patient to the hospital financial counselors, clinic collection specialists, home care social worker, or direct the patient to information regarding the widely publicized resources available.

Patient Financial Assistance – Application

1. All Patient Financial Assistance (FAP) applications will be treated with respect and their financial information will be kept confidential.
2. Efforts should be taken to determine a patient’s eligibility for financial assistance at or before the time of admission or service; however, application and determination may be made after services are provided and must be considered prior to any Extraordinary Collection Actions.
3. Financial assistance application forms shall be written in an easy to understand manner and will include a list of required financial documents that must be submitted with the application (pay stubs, tax forms, etc.) See Attachment B.
4. The application will include contact information including a phone number that the applicant can call for assistance. The applicant may request and receive assistance from a financial counselor to complete the form.
5. Applications may be mailed, faxed, or delivered in person.
6. St. Luke’s will accept applications for up to 240 days after the first post-discharge billing statement is sent.
7. St. Luke’s may require the applicant to apply for Medical Assistance through the State Department of Health and Human Services.
8. The applicant must provide the information needed to complete a financial assistance application unless the applicant qualifies for an exemption as outlined under Presumptive Financial Assistance Eligibility. Applications are available from the financial

counselors, clinic collections specialists, home care social worker, St. Luke’s website, and at all admitting areas.

9. Upon receipt of the financial assistance application, the financial counselors will review the application and the following documents:
 - a. Copy of written denial letter from Medical Assistance, if required.
 - b. Income information and verifications, such as copies of your paycheck stubs or a written statement from your employer showing year to date earnings.
 - c. Copy of last year’s tax return.
 - d. Copies of the most recent statement(s) showing balance in each bank account(s).
 - e. Copies of the most recent statement(s) showing value of each investment listed.
10. An interview with the applicant (or representative) to clarify application information will be scheduled as soon as practical and at a mutually convenient time if required.
11. If the applicant submits an incomplete application within 240 days of sending the first post-discharge billing statement, St. Luke’s will send them a notice of what information is missing from the application and give a reasonable amount of time to complete the application before initiating any Extraordinary Collection Actions. If an individual submits a complete financial assistance application, St. Luke’s will cease all collection efforts until a FAP eligibility determination is made.

Patient Financial Assistance – Eligibility Determination

1. Every effort will be made to determine the applicant’s eligibility for the FAP at the earliest possible time.
2. Applications will be processed in an accurate, timely and consistent manner. Decisions will generally be communicated in writing to the applicant within 30 days of receipt of the completed application and financial documents. Collection activity will be put on hold during this assessment period.
3. Eligibility for FAP is based on the value of the applicant’s income and assets. The financial counselors will complete the FAP eligibility calculations using income information, assets information, and will calculate:
 - a. Earned income including monthly gross wages, salary, and self-employment income
 - b. Unearned income including dividends, interest and income from any other source such as unemployment or workers compensation
 - c. Number of dependents in the household
 - d. Information to determine the applicants financial status, including assets and liabilities
4. An individual applicant with assets exceeding \$10,000, a family with assets exceeding \$20,000, or a business owner with assets exceeding \$500,000 is not eligible for financial assistance. Retirement assets less than \$100,000 are not included in the asset calculation.
5. The applicant’s income and assets are compared to current Federal Poverty Guidelines (see attachment A). The FAP eligibility and discount schedule is as follows:

Poverty Level	Services Discount
100% or less	100%
101% to 150%	90%
151% to 200%	75%

201% to 300%	Greater of AGB or 50%
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6. Approval levels for FAP are as follows:

Discount	Approver
\$0 - \$2,499	Director, Business Services, Home Care/Hospice Director, CBO Manager
\$2,500 - \$9,999	Business Services Director
\$10,000 and over	Chief Financial Officer

7. If St. Luke's has reason to believe that any information included in the application is inaccurate or incomplete, the application will be considered incomplete until all application requirements are fulfilled.
8. If a valid address is not provided with the application, financial assistance may be denied.
9. On occasion, extenuating circumstances may exist which could cause St. Luke's to grant financial assistance to a patient who may otherwise not meet the quantitative criteria. In such cases, the Department Director will document why the assistance was granted and supporting documentation will be maintained. If an individual would qualify for financial assistance but they are unable or unwilling to complete the required application, the CFO may approve financial assistance if enough evidence exists to support that determination.
10. Non-payment of a previous patient account balance will not affect future eligibility for FAP.
11. If an applicant is denied eligibility under the FAP, the applicant may appeal St. Luke's decision within 30 days. The appeal process will include an appropriate non-financial representative as well as a financial professional. The appeal process will be documented as a formal Patient Grievance.

Patient Financial Assistance – Discount Application

1. FAP discount applies toward the remaining balance only. If an individual has made partial payment, and the individual is subsequently determined to qualify for financial assistance under this policy, any payment in excess of their newly calculated remaining liability shall be refunded within 30 days of the FAP eligibility determination. If the refundable amount is less than \$5.00, St. Luke's may not issue a refund. St. Luke's may contact the individual to ask if the individual agrees to transfer the refund amount to another patient liability.
2. The FAP eligible discount may be applied to services provided up to one year before the application was approved.
3. If the applicant indicates that they qualify for FAP, the discount may apply to a service provided within 180 days following the application approval.
4. If an application was previously approved and the patient is receiving ongoing clinic services, eligibility may be extended if the applicant provides documentation to prove that their financial circumstances have not changed. Evidence of financial status may be required as outlined in Attachment B.

Presumptive Financial Assistance Eligibility

1. In some instances, a patient may appear eligible for FAP, but has not submitted an application and/or documentation on income and assets. In the event there isn't evidence to support a patient's eligibility, St. Luke's may use outside agencies or vendors to determine eligibility and potential financial assistance. These agencies may use publically available and purchased transaction data to estimate a guarantor's financial profile and household size. Examples of such data are: census data, birth certificates, marriage licenses, legal notices, bankruptcy filings, automobile registrations, property tax records, as well as point-of-sales transactions data that retailers and credit card companies make available for purchase. The agency uses scoring technology to determine FAP eligibility and the percent discount to apply to the patient's account.
2. Circumstances under which St. Luke's may utilize third-party information to make presumptive determinations may include incomplete or missing information on a financial assistance application or prior to placement with a collection agency.
3. Individuals who meet presumptive eligibility criteria may be granted financial assistance without completing an application.
4. If the presumptive assessment determines that the patient is eligible for less than a 100% discount, St. Luke's will notify the individual regarding the basis for the presumptive eligibility determination and information about how they may complete an application to determine if they are eligible for a larger discount under the FAP.
5. Individuals will be granted presumptive eligibility for FAP on the basis of individual life circumstances. Examples are homelessness or deceased patients with no known estate. Documentation in the patient's account will support this determination.

FAP Relationship to Self-Pay Collections Policy

1. St. Luke's has developed policies and procedures for internal and external collection practices that take into account the extent to which the patient qualifies for financial assistance and the patient's good faith effort to comply with his or her payment agreements.
2. In the event that a patient fails or refuses to fulfill their financial obligation, St. Luke's may engage in extraordinary collection actions, including:
 - a. Referral of unpaid balances to external collection agencies;
 - b. Actions that require a legal or judicial process such as a lien on property or garnishment of wages
3. Prior to initiating ECA's, St. Luke's will follow all applicable regulations and make reasonable efforts to determine whether an individual who has an unpaid account is eligible for FAP.
4. St. Luke's will refrain from any ECA's for at least 120 days after sending the first post-discharge billing statement and allowing at least 240 days to apply for financial assistance.
5. The Billing and Collections Policy is available to the public online at www.slhduluth.com/assistance and paper copies of the policy are available upon request and without charge by mail, in the Emergency room and in all admissions areas.

Amounts Generally Billed (AGB)

1. An individual who is determined to be eligible for charity care under this policy shall not be required to pay more for emergency medical care and other medically necessary care than the amounts generally billed to individuals who have insurance covering such care.
2. This AGB limit shall be used by St. Luke's to determine the maximum amount that an individual may be liable to pay after such individual is determined to be eligible for charity care under this policy.
3. St. Luke's shall use the "look-back method" as described in Regulation 1.501(r)-5(b)(3).
4. St. Luke's shall calculate a new AGB limit at least annually.
5. St. Luke's shall implement the new AGB limit within 120 days of the end of the 12-month period used for the look-back method calculation.
6. Attachment C contains information about the currently applicable AGB limit and how it was calculated.

Patient Financial Assistance – Participating Providers and Exclusions

1. This policy relates only to St. Luke's Hospital, St. Luke's Clinics, St. Luke's Home Care and St. Luke's Hospice. A list of participating providers is included in Attachment D.
2. St. Luke's Hospital and Lake View Hospital (Two Harbors, MN) may share FAP eligibility information. Eligibility at St. Luke's or Lake View does not guarantee that the individual will meet eligibility criteria at the other hospital.
3. A list of non-participating providers is included in Attachment E. Individuals may contact these other service providers for information about any financial assistance programs they may have.
4. Only medically necessary services are covered under the FAP.

Recording of Patient Financial Assistance

1. Patient Financial Assistance must be recorded and valued in accordance with the Healthcare Audit Guide.
2. Documentation of financial assistance must be maintained for a minimum of seven (7) years.

Accountability

1. St. Luke's Board of Directors will approve the Patient Financial Assistance Policy and any substantive changes to the policy.
2. Management will prepare and submit an annual report regarding the financial assistance policy and program to the Board of Directors.
3. Financial assistance information will be shared with appropriate community service agencies.

FORMS:

St. Luke's Patient Financial Assistance Application
Plain Language Summary of St. Luke's FAP

ATTACHMENTS:

Attachment A – Federal Poverty Guidelines (current year)
Attachment B – FAP Application Document Requirements
Attachment C – Amounts Generally Billed
Attachment D – List of Participating Providers with St. Luke’s Financial Assistance Program
Attachment E – Clinics, Physicians and Providers that do not participate in St. Luke’s Financial Assistance Program

RELATED POLICIES:

Business Services – Billing and Collections (C-32)
Business Services – Uninsured Service Discount (C-41)

ADDITIONAL RESOURCES:

www.mnsure.org
www.healthcare.gov
www.insureduluth.org

REFERENCE:

Federal Poverty Guidelines – Updated each year in February and published in the Federal Register. <http://aspe.hhs.gov/poverty-guidelines>

Federal Register, Vol. 79, No. 250, December 31, 2014. Additional Requirements for Charitable Hospitals; Community Health Needs Assessments for Charitable Hospitals; Requirements of a Section 4959 Excise Tax Return and Time for Filing the Return.

COORDINATION:

Director, Business Services

KEY INVOLVED DEPARTMENTS:

Business Services
Central Business Office
Hospice / Home Care Business Office

APPROVED:

Vice President/CFO

APPROVED:

President/CEO

APPROVED:

Chairman, Board of Directors

ATTACHMENT A

FEDERAL POVERTY GUIDELINES FOR 2019

Household Size	100%	150%	200%	300%	400%
1	12,490	18,735	\$24,980	\$37,470	\$49,960
2	16,910	25,365	33,820	50,730	67,640
3	21,330	31,995	42,660	63,990	85,320
4	25,750	38,625	51,500	77,250	103,000
5	30,170	45,255	60,340	90,510	120,680
6	34,590	51,885	69,180	103,770	138,360
7	39,010	58,515	78,020	117,030	156,040
8	43,430	65,145	86,860	130,290	173,720

For family units of more than 8 members, add \$4,420 for each additional member.

ATTACHMENT B

FAP APPLICATION DOCUMENT REQUIREMENTS

1. Copy of written denial letter from Medical Assistance, if required.
2. Income information and verifications, such as copies of your paycheck stubs or a written statement from your employer showing year to date earnings.
3. Copy of last year's tax return.
4. Copies of the most recent statement(s) showing balance in each bank account(s).
5. Copies of the most recent statement(s) showing value of each investment listed.

ATTACHMENT C

Hospital Amounts Generally Billed Calculation and Information

Hospital uses the “look-back method” as defined in Reg. 1.501(r)-5(b)(3) to calculate the amount generally billed (“AGB”) to individuals who have insurance covering medically necessary care. An individual who is determined to be eligible for charity care under this policy shall not be required to pay more than the amounts generally billed to individuals who have insurance covering such care.

Hospital calculates a single AGB limit to apply to all individuals who qualify for charity care. The AGB limit currently in effect is 40.6%.

The AGB limit was calculated using the following formula.

$$\frac{\text{Total Allowed Claims and Other Payments}}{\text{Gross Charges}}$$

In the AGB calculation, “Total Allowed Claims” are those claims that have been submitted by Hospital and were allowed by Medicare fee-for-service and all private health insurers over a specified 12-month period. The calculation is not based on the date the service was provided to the individual or on the date the claim was paid. Hospital uses all claims for medical care in this calculation, rather than just those allowed for emergency and other appropriate hospital-based medical services.

“Other payments” are co-payments, co-insurance, deductibles, and any other payments made in relation to a claim included in Total Allowed Claims.

“Gross charges” are the total charges of the services for those claims included in Total Allowed Claims.

Hospital’s most recent calculation of the AGB limit was for the period that began 1/1/2017 and ended 12/31/2017. This AGB limit was calculated by Controller, Accounting/Finance and reviewed and approved by VP/CFO, Administration.

Last Updated: 01/18/2019

ATTACHMENT D

List of Participating Providers with St. Luke's Financial Assistance Program

St. Luke's Hospital

St. Luke's Home Care Services

St. Luke's Primary Care Clinics

Bay Area Medical Clinic, Silver Bay, MN

Chequamegon Clinic, Ashland, WI

Denfeld Medical Clinic

Hibbing Family Medical Clinic, Hibbing, MN

Lake View Medical Clinic, Two Harbors, MN

Laurentian Medical Clinic, Mountain Iron, MN

Lester River Medical Clinic

Mariner Medical Clinic, Superior, WI

Miller Creek Medical Clinic, Hermantown, MN

Mount Royal Medical Clinic

P.S. Rudie Medical Clinic

St. Luke's Medical Arts Clinic

St. Luke's Internal Medicine Associates

St. Luke's Pediatric Associates

St. Luke's Hospital Medicine

St. Luke's Specialty Care Clinics

St. Luke's Allergy & Immunology Associates

St. Luke's Anesthesia Associates

St. Luke's Cardiology Associates

St. Luke's Cardiothoracic Surgery Associates

St. Luke's Dermatology Associates

St. Luke's Emergency Services

St. Luke's Endocrinology Associates

St. Luke's Gastroenterology Associates

St. Luke's Infectious Disease Associates

St. Luke's Neurology Associates

St. Luke's Neurosurgery Associates

St. Luke's Obstetrics & Gynecology Associates

St. Luke's Occupational Health Clinic

St. Luke's Oncology & Hematology Associates

St. Luke's Ophthalmology Associates

St. Luke's Orthopedics & Sports Medicine

St. Luke's Pavilion Surgical Associates

St. Luke's Physical Medicine & Rehab Associates

St. Luke's Psychiatry Associates

St. Luke's Pulmonary Medicine Associates

St. Luke's Radiation Oncology Associates

St. Luke's Rheumatology Associates

St. Luke's Urology Associates

St. Luke's Ear, Nose, & Throat Associates
St. Luke's Center for Diagnostic Imaging
St. Luke's Interventional Radiology
St. Luke's Interventional Pain Management
St. Luke's Nephrology Clinic
St. Luke's Vascular Surgery Associates
St. Luke's Regional Cancer Center
Hibbing Medical Clinic Urgent Care Hibbing, MN
Chequamegon Clinic Urgent Care Ashland, WI
Mariner Medical Clinic Urgent Care Superior, WI
Denfeld Medical Clinic Urgent Care
Miller Creek Medical Clinic Urgent Care
Laurentian Medical Clinic Urgent Care
QCare Express Clinic, Cub Foods
QCare Express Clinic, Mt. Royal Clinic

ATTACHMENT E

Clinics, Physicians and Providers that DO NOT Participate in St. Luke's Financial Assistance Program

Physicians and Allied Health Professionals		
Clinic	Clinic Address	Specialty
Aturaliya, Pravin DDS	920 East First Street, #102, Duluth, MN 55805	Dentistry
Bluestone Oral and Maxillofacial Surgery	720 Medical Arts Building Duluth, MN 55802	Dentistry
Center for American Indian Resources	211 W 4th St Duluth, MN 55806	Family Practice
Community Memorial Hospital	512 Skyline Boulevard Cloquet, MN 55720	Orthopedics
Conrad Meints & Associates	517 Medical Arts Building Duluth, MN 55802	Podiatry
Consulting Radiologists, LTD	7505 Metro Blvd. Suite 400 Edina, MN 55439	Radiology
Dental Implant and Reconstructive Center	1212 Medical Arts Building Duluth, MN 55802	Dentistry
William J. Schuldt, DDS	1229 Medical Arts Building, Duluth MN, 55802	Dentistry
Duluth Psychological Clinic	205 W Second St Duluth, MN 55805	Psychiatry
Waterstone Clinic	1626 London Rd #746, Duluth, MN 55812	Psychiatry
Essentia Health	400 E 3rd St Duluth, MN 55805	Multiple
Essentia Health Ely	303 W Conan St Ely, MN 55731	Family Practice
Essentia Health Hayward	11134 N State Rd 77 Hayward, WI 54843	Family Practice
Essentia Health Hermantown	4855 W Arrowhead Rd Hermantown, MN 55811	Family Practice
Essentia Health Lakeside	4621 E Superior St Duluth, MN 55804	Family Practice
Essentia Health Lakewalk	1502 London Road #102 Duluth, MN 55812	Family Practice
Essentia Health Proctor	211 S Boundary Ave Proctor, MN 55810	Family Practice
Essentia Health Superior	3500 Tower Ave Superior, WI 54880	Family Practice
Essentia Health West Duluth	4212 Grand Ave Duluth, MN 55807	Family Practice
Ever Smiles	4419 Airbase Rd Hermantown, MN 55811	Dentistry
Family Practice Center	330 N 8th Ave E Duluth, MN 55805	Family Practice
Gateway Family Health Clinic	4570 County Highway 61 Moose Lake, MN 55767	Family Practice
Gillette Children's Healthcare	200 University Ave E St. Paul, MN 55101	Physical Medicine & Rehabilitation
Great Lakes Children's Dental	2710 Piedmont Ave Duluth, MN 55811	Dentistry
Hanger Prosthetics and Orthotics	717 E Central Entrance Duluth, MN 55811	Physical Medicine & Rehabilitation
Human Development Center	1401 E 1st St Duluth, MN 55805	Psychiatry
Lab Med Spec of Duluth	915 E 1st St Duluth, MN 55805	Pathology
Lake Superior Community Health Center	4325 Grand Ave Duluth, MN 55807	Family Practice
University of Minnesota	420 Delaware Stree, Minneapolis, MN 55455	Cardiology

Clinic	Clinic Address	Specialty
Maryland, Daniel MD	324 West Superior Street, Suite 509, Duluth, MN 55802	Ophthalmology
Mercy Hospital	710 S Kenwood Ave Moose Lake, MN 55767	General Surgery
Min-No-Aya-Win Clinic	927 Trettel Lane Cloquet, MN 55720	Family Practice
Neural Watch/Biotronic	812 Avis Dr Ann Arbor, MI 48108	Neurology
Northern Foot & Ankle	408 Medical Arts Building Duluth, MN 55802	Podiatry
Northern Oral and Maxillofacial Surgeons	3617 W Arrowhead Rd Duluth, MN 55811	Dentistry
Northern Orthotics and Prosthetics	925 E Superior St #102 Duluth, MN 55802	Physical Medicine & Rehabilitation
Northland Neuro and Myology	1000 E 1st St N202 Duluth, MN 55805	Neurology
Northland Plastic and Recon	1420 London Rd #101 Duluth, MN 55805	Plastic Surgery
Oral and Maxillofacial Associates	1000 E 1st St N302 Duluth, MN 55805	Dentistry
Orthopaedic Associates	1000 E 1st St N404 Duluth, MN 55805	Orthopedics
Pavilion Surgery Center	920 E First St Duluth, MN 55805	Otolaryngology
Pediatric Surgical Associates	347 Smith Ave N #502 St. Paul, MN 55102	Pediatrics
Piedmont Dental	2860 Piedmont Ave Duluth, MN 55811	Dentistry
The Children's Heart Clinic	2545 Chicago Ave #500 Minneapolis, MN	Pediatrics
The Dental Specialists	1835 County Rd C W Suite 290 Roseville, MN 55113	Dentistry
Raiter Clinic	417 Skyling Boulevard Cloquet, MN 55720	Family Practice
Range Podiatric Care	809 6th Avenue North	Podiatry
Relf Eye Associates	4413 Airbase Road Hermantown, MN 55811	Ophthalmology
Twin Ports VA Clinic	3520 Tower Ave Superior, WI 54880	Family Practice
Twin Ports VA Clinic	3520 Tower Ave Superior, WI 54880	Internal Medicine
Weis Eye Center	4815 W Arrowhead Rd #120 Hermantown, MN 55811	Ophthalmology