

Financial relief may be available to patients who have received non-elective care and do not qualify for state or federal assistance and are unable to establish payments or pay their balance. In most cases, this will apply to patients who fall between 0 and 200% of the *Federal Poverty Level*.

Federal Poverty Levels are based on total household income, with sufficient supporting documentation provided by the patient, qualifying patients will have a discount applied to their bill.

A validation will be completed to ensure that if any portion of the patient's medical services can be paid by any federal, or state governmental health care program (e.g., *Medicare, Medicaid, Champus, Medicare secondary payor*), private insurance company, or other private, non-governmental third-party payor, that the payment has been received and posted to the account. Financial discounts can not be applied to any account with any outstanding payer liability. We expect patients to use all available resources before financial aid will be considered.

Please see the Federal Poverty Income Guidelines Chart below for eligibility and links to our financial assistance policy and application.

FEDERAL POVERTY GUIDELINES (200%)	
People in family/ household	Poverty Guidelines
1	\$31,300
2	\$42,300
3	\$52,300
4	\$64,300
5	\$75,300
6	\$86,300
7	\$97,300
8	\$108,300

For families/households with more than 8 persons, add \$11,000 for each additional person.

Federal Poverty Level maximum income guidelines are provided above. The information provided here is updated April 1st each year.