



Finances

Quick Guide to Charity Care Programs

Nonprofit hospitals are required to offer free or discounted health care to patients with certain incomes. This is called charity care but could also be called patient financial assistance or ability to pay programs. Charity care can include inpatient and emergency room services. Nonprofit hospitals are required to post their financial assistance policy online and in the hospital. Hospitals must also pause sending a bill to collections while they are reviewing a financial assistance application. Some for-profit hospitals also offer financial assistance programs.

5 Steps to Charity Care

1. Check if you are eligible

Each hospital's charity care programs have different rules. These are the key things that you need to find out:

- What are the income or other requirements to qualify?
- What is the deadline to apply? How do you apply?
- Who should you call if you have questions?

You can find information about your hospital's charity care program by typing the name of the hospital and the words "financial assistance" into Google or another internet search engine. Make sure you have found the link for the right hospital as many hospitals have similar names. You need to find and download two things: the financial assistance policy and the application.

Hospitals offer charity care to patients who are uninsured or underinsured, based on their household income level. Households are people who live together and are responsible for each other's bills. For example:

- 2 parents and their 2 minor children would be a household of 4.
- 4 roommates who live together and pay taxes separately would each be a household of 1.
- An adult who lives with their parents, but files their own taxes and is not claimed as a dependent by the parents, would also be a household of 1.

Nonprofit hospitals are required to give patients 240 days to apply for financial assistance. The 240 days starts from the day the hospital sends you the first copy of the bill, not the day that you visit the hospital. Some hospitals will give even more time to apply. It's always worth calling the hospital to find out if they will accept a financial assistance application, even if the deadline has passed.

If you have any questions about the financial assistance rules at your hospital, the best place to start is to call the hospital financial assistance department directly. You can usually find a phone number on the financial assistance website or in the financial assistance policy. This number may be different from the hospital's billing office. When you call, make sure to ask for the financial assistance department.

2. Fill out your hospital's application

Download the application from the hospital website. Print it out or fill it out on your computer with a PDF editor. Read the instructions and application carefully. They will probably ask:

- What is the patient's name and date of birth?
- Who are the members of the household? Does anyone in the family receive any public assistance?

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- Who is responsible for paying the bill and their contact information? This is sometimes called the guarantor. A child's bill, for example, would be paid by their parent.
- How much money does each person in the household make and where do they work?
- What are the monthly expenses of the household?
- How much money does the family have saved in bank accounts or other investments?



Fill in every question on the application that you possibly can. If the answer is \$0 or you don't know, it's ok to write that, but try to give them as much information as you can. And, make sure you sign the application. Some hospitals also require a spouse or witness to sign.

In addition to the application, the hospital will also ask for proof your application is true. For example, a hospital may ask for copies of your most recent 3 months of paystubs and last year's tax return. Some will ask for:

- Proof that you live in the state or county the hospital serves, like a utility bill that has your name and address
- Proof of health insurance, or proof you have applied for Medicaid or other public health insurance programs
- Copies of bank account statements and unemployment benefit letters

Hospitals may deny your application if you don't submit everything they require.

3. Send your application to the hospital

Fax, email, mail, or take your completed application to the hospital. Each hospital has different rules for how to submit the application, so make sure to read their instructions. Include copies of all the documents requested. It can be helpful to keep a copy of what you send to the hospital for your own records. This can also be helpful if the hospital loses your application and you need to resubmit it.

4. Follow up with the hospital

You can call the hospital a few days after you send in your application, to make sure that they have received it. If they ask for more documents, make sure to send them within a few days. You will probably hear from your hospital in about 3 to 4 weeks with a decision about your application. They may email, call, or send a letter, so keep an eye out for any messages they send you. If you do not hear from the hospital, you can call the financial assistance department to check in. Here is what you can say: "Hi. My name is _____ and my date of birth is _____. I sent in my financial application on _____ (the date you sent it in). Can you confirm you received my application and share the status?"

Here are more questions you can ask:

If they are still reviewing your application: When will the review be completed? Do you need anything else from me to complete your review?

If they have approved your application: Will you be sending me a confirmation letter? If the bill is in collections, can you confirm that the debt collector will be notified?

If they say you need to send more information: What exactly do you need? Is there a deadline to submit it? How should I submit it?

If they say your application was denied: Why? Can I reapply or appeal with other information? Is partial assistance an option?

If they say it has been turned over to collections: When was it turned to collections? Is financial assistance still an option?

5. If needed, appeal your hospital's decision

If the hospital denies your application, find out why. The hospital must send the patient a letter with the final charity care decision and reason. You may be able to reapply or appeal the decision. Ask the hospital if they will consider an appeal. You may also want to draft a letter explaining your financial circumstances and why you can't afford the bill.

More Resources: Dollar For (DollarFor.org/TriageCancer) is a nonprofit organization that can check if you are eligible for Charity Care at your hospital, send you tips on applying, or even submit an application to the hospital on your behalf. For more information about managing finances and medical bills, visit TriageHealth.org/navigating-finances.



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