# Plain Language Summary of



# Financial Assistance Policy

Where the world comes for answers

#### Overview

Boston Children's Hospital (BCH) is committed to being a resource for children in need of care. BCH provides financial assistance under the Financial Assistance Policy for qualifying patients who need help paying for emergency or medically necessary care they receive.

## Availability of Financial Assistance\*

You may be able to receive financial assistance for emergency or other medically necessary care at BCH if you do not have health care coverage and are not eligible for health care coverage. Please note that there are certain service exclusions that are not typically eligible for financial assistance.

# **How to Apply for Financial Assistance**

BCH, through its financial counselors, will assist patients/guarantors through the financial assistance application process. Financial counselors will assist patients/guarantors of BCH and its related Physician Foundations with applying for public programs, such as Medicaid, MassHealth, ConnectorCare and the Health Safety Net and/or BCH financial assistance. Those seeking financial assistance will be asked to complete a Financial Assistance Application and submit supporting documentation for verification.

#### **Eligibility Requirements**

If your and/or your guarantor's combined family income is at or below 400% of the federal poverty guidelines, and you are a legal resident of Massachusetts, Connecticut, Maine, New Hampshire, Rhode Island, Vermont or New York (excluding the New York metropolitan area), you may be eligible for financial assistance. No person eligible for financial assistance under the Financial Assistance Policy will be charged more for emergency or other medically necessary care than amounts generally billed to individuals who have health plan coverage for such care. If you have health care coverage or other funding available to pay for your care, you may not be eligible for financial assistance. Please refer to the full policy for a complete explanation and details.

### **Where to Find Information**

There are many ways to find information about the financial assistance determination process, or get copies of the Financial Assistance Policy, Financial Assistance Application, and Credit and Collection Policy, free of charge.

- Download the information online at <a href="https://www.childrenshospital.org/financialassistance">www.childrenshospital.org/financialassistance</a>
- Request the information in writing, by mail or by visiting the Patient Financial Services Center at 300 Longwood Avenue, Boston, MA, Farley Building room 165
- Request the information by calling Patient Financial Services Customer Support at (617) 355-3397

The Financial Assistance Policy, Financial Assistance Plain Language Summary, Financial Assistance Application, and the Credit and Collection Policy are available in multiple languages.

<sup>\*</sup> The Boston Children's Hospital Financial Assistance Policy does not apply to Boston Children's Health Solutions, Rx, LLC d/b/a Boston Children's Pharmacy or any items provided by Boston Children's Health Solutions, Rx, LLC d/b/a Boston Children's Pharmacy.