**About Getting Assistance with Your Bill**

This is for anyone who receives hospital services from a Texas Health Resources (THR) affiliated hospital. The Financial Assistance Policy and the Plain Language Summary for obtaining assistance with your bill are available in English and Spanish and other languages upon request. Financial assistance does not apply to bills from doctors, outside labs or other providers.

**How Do I Qualify for Financial Assistance?**

You can ask for help with your bill at any time during your hospital stay or billing process. We will determine how much you owe by reviewing income, assets, or other resources. If your yearly income is less than or equal to 200% of the current Federal Poverty Guideline, you may receive some financial assistance. Federal Poverty Guidelines can be found at: <http://aspe.hhs.gov/poverty/index.cfm>.

You may qualify for assistance with all or part of your hospital bill. The help is based on a sliding scale that considers your yearly income and family size.

**How Can I Apply for Financial Assistance?**

To obtain a free copy of the Financial Assistance Application, Plain Language Summary, or Financial Assistance policy go to: [www.texashealth.org/Financial-Assistance](http://www.texashealth.org/Financial-Assistance) You can also pick up free paper copies, request free copies by mail, or receive help with the application in person at any THR hospital in the admitting department, or at 500 E Border Street Suite 1200, Arlington Texas 76010. You can ask for assistance with the Financial Assistance Policy or the application by calling the Customer Service Department at 1.800.715.7210. In some cases you may receive financial assistance from the hospital without applying.

**Paperwork**

You are responsible for providing information timely about your health benefits, income, assets, and any other paperwork that will help to see if you qualify. Paperwork might be bank statements, income tax forms, check stubs, or other information.

**Emergency and Medically-Necessary Care**

If you qualify for help with your bill, you will not be charged more for emergency or medically-necessary care than amounts generally billed to people who have insurance coverage for the same kind of care. To determine amounts generally billed we use a look-back method (we compare the amount paid by insured patients and their insurance companies in the prior year).

**Collection Activities**

Bills that are not paid 120 days after the first billing date may be reported on your or your guarantor’s credit history. You or the guarantor can apply for help with your bill at any time during the collection process by contacting the Customer Service Department at 1.800.715.7210. We generally do not sue patients, take action against personal property, or garnish wages.