

## **Financial Assistance Full and Discount Partial Charity Care – Plain Language Summary**

Our hospital provides free or discounted medical rehabilitation medically necessary care to patients who are uninsured or underinsured and who qualify for assistance under its Financial Assistance Full and Discount Payment Charity Care Policy. Assistance does not apply to elective services or items that are solely for the comfort or convenience of a patient. This document is only a summary. Please refer to the Financial Assistance Full and Discount Payment Charity Care for complete details.

### **Eligibility Requirements and Offered Assistance**

To qualify for Charity Care, an evaluation of qualification for State or Federal funding must be completed. Patients who qualify for assistance are eligible for income/asset-based, sliding scale discounts for emergency and other medically necessary care. In general:

- Patients or guarantors earning 250% or less of the Federal Poverty Guidelines may qualify for Full Charity Care.
- Patients whose family income is between 251% and 400% of the Federal Poverty Guidelines may be eligible for Discounted Partial Charity Care.
- Patients or guarantors earning 401% or more may receive standard self-pay discounts.

### **How to Obtain Copies of the Financial Assistance Policy and Financial Assistance Application**

Copies of the Financial Assistance Full and Discount Payment Charity Care Policy, this plain language summary, and the application are available free of charge upon request by writing to the address below. These documents may also be found online here:

<https://www.palomarhealthrehabinstitute.com/patient-experience/help-paying-your-bill>

### **How to Apply for the Financial Assistance Full and Discount Payment Charity Care Policy**

To apply for financial assistance, please submit a complete Financial Assistance Full and Discount Payment Charity Care Application with supporting documents: [Mercedes.Primus@lifepointhealth.net](mailto:Mercedes.Primus@lifepointhealth.net)  
Mercedes Primus/ 314-639-0418

Further information about the policy and assistance with the application process are available from business office by phone: 442-277-6202 or in person at the address below: 2181 Citracado Parkway, Escondido, CA 92029.

### **Help Paying Your Bill**

There are free consumer advocacy organizations that will help you understand the billing and payment process. You may call the Health Consumer Alliance at 888-804-3536 or go to [healthconsumer.org](http://healthconsumer.org) for more information.