

## FINANCIAL ASSISTANCE ELIGIBILITY SUMMARY

### **WHO CAN APPLY**

- The Financial Assistance Program (FAP) policy provides free or discounted care for those who have tried all other payment options, and:
  - Have household income at or below 400% of the current year's Federal Poverty Guidelines (see chart). Certain assets such as bank accounts or home equity may count toward this amount.
  - Have insurance <u>or</u> have visited our emergency department.
  - Have submitted a properly completed application within 8 months of the first post-discharge statement.

2020-2021 FEDERAL POVERTY LEVEL CHART	
Persons in	400% of Poverty
Family/Household	Guideline
1	\$51,520
2	\$69,680
3	\$87,840
4	\$106,000
5	\$124,160
6	\$142,320
7	\$160,480
8	\$178,640

### **HOW TO APPLY**

- In person at the MCH main campus, located at:
  452 Old Street Rd
  Peterborough, NH 03458
- By calling the FAP office: (603) 924-1717
- By visiting the MCH information desk or emergency department
- By going online to: www.mchfinancialassist.org

# FOR FREE COPIES OF THE POLICY AND APPLICATION

- Use the contacts listed above.
- Interpreter services for other languages are available.

#### **ADDITIONAL INFORMATION**

- Offices and physicians that accept the FAP are those which are MCH-owned.
- The FAP can only be applied toward medically necessary services.
- No patient with FAP will be charged more than other patients would normally be charged;
   Amount Generally Billed (AGB) for Fiscal Year 2021 is 47%.
- If you have any questions, contact the FAP office directly at (603) 924-1717