

FINANCIAL ASSISTANCE ELIGIBILITY SUMMARY

WHO CAN APPLY

- The Financial Assistance (FA) policy provides free or discounted care for those who have tried all other payment options, and:
 - Have gross household income including some assets at or below 400% of the current year's Federal Poverty Guidelines (see chart).
 - 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, that has not gone to bad debt.

2025-2026 FEDERAL POVERTY LEVEL CHART	
Persons in	400% of Poverty
Family/Household	Guideline
1	\$ 62,000
2	\$ 84,600
3	\$106,600
4	\$128,600
5	\$150,600
6	\$172,600
7	\$194,600
8	\$216,600

For families/households with more than 8 persons, add \$5,500 for each additional person

FOR FREE COPIES OF THE POLICY AND/OR APPLICATION

- Refer to How to Receive an application/policy and/or apply
- Interpreter services for other languages are available

HOW TO RECEIVE AN APPLICATION/POLICY and/or APPLY

- By calling the FA office for an application to be mailed: (603) 924-1717
- By visiting MCH and requesting an FA application
- By going online to print the FA application: https://monadnockcommunityhospital.com/financial-assistance/
- Dropping application and documentation off at the Switchboard located at the Main Entrance
- Faxing an FA application and documentation to: (603) 924-1709
- Emailing an FA application and documentation to: FA@mchmail.org
- Mailing an FA application and documentation to:

Monadnock Community Hospital ATTN: Financial Assistance (FA) 452 Old Street Rd. Peterborough, NH 03458

ADDITIONAL INFORMATION

- Offices and physicians that accept the FA are those which are MCH-owned.
- The FA can only be applied toward medically necessary services.
- No patient with FA will be charged more than other patients would normally be charged;
 Amount Generally Billed (AGB) for Fiscal Year 2025 is 52%.
- If you have any questions, contact the FA office directly at (603) 924-1717