



## **Catholic Medical Center Financial Assistance Summary – Plain Language**

CMC provides financial assistance to patients who cannot afford their medical bills. You can get assistance for emergency or medically necessary care. You will not get assistance for cosmetic care.

Your assistance level will depend on your household income. Patients who are uninsured or underinsured and have a household income at or below 200% of the Federal Poverty Guidelines (FPG) may receive financial assistance. Individuals with annual household incomes between 125% and 200% of the FPG will be eligible for a discount off of the patient's bill. Individuals with annual household income less than 125% of the FPG will be eligible for a full discount off of the patient's bill.

If you live in New Hampshire in CMC's service area, you may apply for assistance. If you don't live in NH or in CMC's service area, an exception may be made on a case-by-case basis.

Before being awarded assistance, you may need to apply to other available programs. Programs you may apply to include Medicaid or the exchange marketplace. If you cannot get coverage through a different program, you may apply for assistance with CMC. If you are not approved for assistance with CMC, you will be notified in writing. If you are not approved for assistance, your balance will follow self-pay policies. You may also receive discounts on your balance.

You may obtain an application, the complete financial assistance policy, and the list of providers covered by CMC's assistance policy in the following ways:

- At CMC's billing office, 195 McGregor St. 3rd floor, Manchester, New Hampshire, 03102
- By mail if requested by calling (603) 663-6922 or (603) 663-6780
- By mail if requested by mailing the CMC Billing Office at 195 McGregor St., Manchester, New Hampshire, 03102
- Online at [www.catholicmedicalcenter.org](http://www.catholicmedicalcenter.org)

To apply, you will need to provide documentation with your application, including the following:

- Proof of income for patient, and spouse if applicable) pay stubs, W2's
- 2 Bank statements, (such as January and February)
- Proof of unemployment insurance, social security benefits, disability compensation, pension benefits, worker's compensation benefits
- Copy of Food Stamp allocation, if applicable
- Child support
- Copy of most recent federal tax return
- Proof of Medicaid denial
- Proof of Marketplace premium hardship
- Provide details on how the patient is paying bills with no income.

If you need help with your application, call CMC at (603) 663-8772 or (603) 663-6780.

If you are approved for assistance, you will not be charged an amount more than an insured patient. CMC will review the discount rate annually.

If you are homeless, you may be eligible for financial assistance depending on your income level. You may contact CMC's Health Care for the Homeless program at (603) 663-8718. You may also contact the program in person at 199 Manchester St, Manchester, NH, 03103.