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本手册有中文版本。

Cette brochure est disponible en français.

Diese Broschü

Getti
your

Financial A



Financial Assistance Program

AdventistHealth.org/FAP

1-844-827-5047



At Adventist Health, we work hard to help you stay healthy. This includes providing help if

Need help paying for your medical bill?

To find out if you can get help paying your medical bill, ask to fill out a financial assistance application. You can fill it out when you are receiving care or after you get your bill. We will use the information you provide on this form to see if you qualify for help paying your bill.

In general:

- If your yearly income is less than or equal to 200% of the current Federal Poverty Guideline, you may qualify for a full discount on your bill.
- If your yearly income is above 200% of the current Federal Poverty Guideline, you may qualify for a partial discount on your bill.

How do I apply for help?

You can get a free copy of this brochure, our financial assistance policy and an application in different languages by:

1. Going to the registration area
2. Going to our website (AdventistHealth.org/FAP)
3. Calling us at 1-844-827-5047
4. Writing to our address:

Adventist Health

ATTN: Financial Assistance

P.O. Box 677000

Paradise, CA 95967

We can help you fill out the form—just ask. When you complete filling out the form, give it to a registration employee or mail it to the address above.

How do you decide how much financial help I get?

The amount of help you get to pay your bill depends on your financial need. When you qualify for assistance, we use the average amount paid by patients with insurance to determine how much you will be asked to pay for emergency and medically necessary care.