



# Financial assistance to help with your bills

Novant Health will provide financial assistance for patients who receive medically necessary services and meet the eligibility requirements under the policy. If eligible for financial assistance, patients will receive a 100% discount or free care. The financial assistance program does not cover elective services.

## How do I apply?

You may obtain copies, in English and other languages, of the financial assistance policy, the billing and collecting patient balances policy, an application for financial assistance, and a Plain Language Summary of the financial assistance policy by:

- Visiting the Novant Health website at <https://www.novanthealth.org/FinancialAssistance>
- Visiting the Financial Counseling office at any Novant Health hospital at the addresses listed on the next page. Financial Counseling can provide assistance with completing the application.
- Calling Customer Service toll free at 1-844-320-9170 and requesting a free copy of the policy and an application be mailed to you.
- Calling any Novant Health hospital financial counselor at the numbers listed on the next page.

## Am I eligible?

In order to qualify for Financial Assistance all of the following conditions must be met:

- The patient must be uninsured or, in certain circumstances, have limited insurance coverage.
- The patient must be unable to access other programs that would cover medical expenses.

- The patient's annual family income must be no more than 300% of the current year Federal Poverty Guidelines.
- The patient must not have substantial cash assets.
- The patient must not have declined health insurance through an employer.
- The patient must not be ineligible for government sponsored coverage because of noncompliance with requirements.
- The service must be considered medically necessary (generally defined as urgent or emergent).
- The patient must live in the Novant Health service area.
- The application and supporting documentation must be submitted to the hospital business office or financial counseling department.

## How will I know if I have been approved?

Once all requested documents are received the application will be reviewed. An approval or denial letter will be mailed to each applicant. The financial assistance application and documentation must be updated every six months, or when the patient's income or other key circumstances change. Each visit within the six month period will be reviewed for potential access to other programs.

## Exclusions:

This policy only applies to services rendered at a Novant Health facility. It does not apply to services rendered by any independent physicians or practitioners that are not employed by Novant Health. This includes but is not limited to Anesthesiologists, Radiologists, and Pathologists. No individual who is eligible for financial assistance will be charged more than amounts generally billed for emergency or other medically necessary care to individuals who have insurance covering such care.

## **SC Financial Counseling Contact Information**

### **Novant Health East Cooper Medical Center**

2000 Hospital Drive  
Mount Pleasant, SC 29464  
(843) 881-0100

### **Novant Health Hilton Head Medical Center**

625 Hospital Center Blvd.,  
Hilton Head Island, SC 29926  
(843) 784-8000

### **Coastal Carolina Hospital**

1000 Medical Center Drive  
Hardeeville, SC 29927  
(843) 681-6122

For questions or for help with completing the financial assistance application contact:

### **Conifer Financial Assistance Center (CFAC)**

PO Box 223849  
Dallas TX 75222-3849  
(888) 233-7868