



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 <http://www.novanthealth.org/home/patients--visitors/your-healthcare-costs/financial-assistance-for-the-uninsured.aspx>
- 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 1-844-266-8268 option 3 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.

<p>Novant Health Forsyth Medical Center 3333 Silas Creek Parkway Winston-Salem, NC 27103</p> <p>Novant Health Clemmons Medical Center 6915 Village Medical Circle Clemmons, NC 27012</p> <p>Novant Health Kernersville Medical Center 1750 Kernersville Medical Parkway Kernersville, NC 27284</p> <p>Novant Health Medical Park Hospital 1950 S Hawthorne Rd Winston-Salem, NC 27103</p> <p>Novant Health Thomasville Medical Center 207 Old Lexington Rd Thomasville, NC 27360</p> <p>Novant Health Rowan Medical Center 612 Mocksville Ave Salisbury, NC 28144</p>	336-718-5393
<p>Novant Health Presbyterian Medical Center 200 Hawthorne Ln Charlotte, NC 28204</p> <p>Novant Health Matthews Medical Center 1500 Matthews Township Parkway Matthews, NC 28105</p> <p>Novant Health Huntersville Medical Center 10030 Gilead Rd Huntersville, NC 28078</p> <p>Novant Health Charlotte Orthopedic Hospital 1901 Randolph Rd Charlotte, NC 28207</p>	704-384-0539
<p>Novant Health Brunswick Medical Center 240 Hospital Dr NE Bolivia, NC 28422</p>	910-721-1404

<p>Novant Health Prince William Medical Center 8700 Sudley Rd Manassas, VA 20110</p> <p>Novant Health Haymarket Medical Center 15225 Heathcote Blvd Haymarket, VA 20169</p>	703-369-8020
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Notice of nondiscrimination

Novant Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Novant Health does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Novant Health:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, please contact Novant Health interpreter services toll-free at 1-855-526-4411, then select option 3. TDD/TTY: 1-800-735-8262.

If you believe that Novant Health has not provided these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Patient services department
Attn: Section 1557 coordinator
200 Hawthorne Lane
Charlotte, NC 28204

Telephone: 1-888-648-7999 (toll-free)
TDD/TTY: 1-800-735-8262

NovantHealth.org/home/contact-us.aspx

You may file a grievance by mail, in person at the Novant Health facility where care was provided, or by submitting the form at the link above. If you need help filing a grievance, call toll-free, 1-888-648-7999 or TDD/TTY 1-800-735-8262.

You may also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available online at ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)
Complaint forms are available at hhs.gov/ocr/office/file/index.html

ATTENTION: Language assistance services, free of charge, are available to you. Call 1-855-526-4411. Select option 3. TDD/TTY: 1-800-735-8262.



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繁體中文 (Chinese)	注意：您可以享受免費的語言協助服務。請撥打1-855-526-4411。選擇選項3。TDD/TTY：1-800-735-8262。
Tiếng Việt (Vietnamese)	CHÚ Ý: Có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho quý vị. Gọi 1-855-526-4411. Chọn tùy chọn 3. TDD/TTY: 1-800-735-8262.
한국어 (Korean)	주의: 무료 언어 지원 서비스를 이용하실 수 있습니다. 1-855-526-4411 번으로 전화하십시오. 옵션 3을 선택하십시오. TDD/TTY: 1-800-735-8262.
Français (French)	IMPORTANT : Des services d'assistance linguistique gratuits sont à votre disposition. Appelez le +1 855 526 4411. Sélectionnez l'option 3. Dispositif de télécommunication pour sourds et malentendants : +1 800 735 8262.
العربية (Arabic)	ملاحظة: خدمات المساعدة اللغوية المجانية متاحة لك. اتصل على الرقم 1-855-526-4411. اختر الخيار 3. جهاز الاتصال الكتابي/الهاتف النصي: 1-800-735-8262.
Русский (Russian)	ВНИМАНИЕ: Для вас доступна бесплатная услуга языковой поддержки. Позвоните по телефону 1-855-526-4411. Выберите вариант 3. Текстовый телефон/телетайп: 1-800-735-8262.
Tagalog (Tagalog – Filipino)	ATENSYON: May mga libreng serbisyo ng tulong sa wika na available sa iyo. Tumawag sa 1-855-526-4411. Piliin ang opsyon 3. TDD/TTY: 1-800-735-8262.
فارسی (Farsi)	برائے توجہ: 1-855-526-4411 خدمات ترجمہ بہ طور رایگان در اختیار تان قرار دارد. با شماره 4411 پر فون کریں۔ اختیار 3 چنیں۔ TDD/TTY: 1-800-735-8262
አማርኛ (Amharic)	ማሳሰቢያ:- የጥንቁ አርዳታ አገልግሎቶች በነጻ ይገኛሉ። በ 1-855-526-4411 ላይ ይደውሉ። አማራጭ 3ን ይምረጡ። TDD/TTY:- 1-800-735-8262.
Deutsch (German)	HINWEIS: Es stehen Ihnen kostenlose Sprachassistentendienste zur Verfügung. Wählen Sie +1 855 526 4411. Wählen Sie Option 3 aus. TDD/TTY: 1 800 735 8262.
اُردُو (Urdu)	برائے توجہ: آپ کے لیے زبان سے متعلق اعانت کی خدمات، مفت دستیاب ہیں۔ 1-855-526-4411 پر فون کریں۔ اختیار 3 چنیں۔ TDD/TTY: 1-800-735-8262
हिंदी (Hindi)	ध्यान दें: आपके लिए नि:शुल्क भाषा सहायता सेवाएं उपलब्ध हैं। 1-855-526-4411 को कॉल करें। विकल्प 3 चुनें। TDD/TTY: 1-800-735-8262.
ગુજરાતી (Gujarati)	સાવધાન: તમારા માટે ભાષા સહાય સેવાઓ, વિના મૂલ્યે, ઉપલબ્ધ છે. 1-855-526-4411 પર કોલ કરો. વિકલ્પ 3 પસંદ કરો. TDD/TTY: 1-800-735-8262.
বাংলা (Bengali)	মনোযোগ দিন: আপনার জন্য বিনামূল্যে ভাষা সহায়তা পরিষেবা লভ্য আছে। 1-855-526-4411 নম্বরে ফোন করুন। বিকল্প 3 নির্বাচন করুন। TDD/TTY: 1-800-735-8262।

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- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
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Patient services department
Attn: Section 1557 coordinator
200 Hawthorne Lane
Charlotte, NC 28204

Telephone: 1-888-648-7999 (toll-free)
TDD/TTY: 1-800-735-8262

NovantHealth.org/home/contact-us.aspx

You may file a grievance by mail, in person at the Novant Health UVA Health System facility where care was provided, or by submitting the form at the link above. If you need help filing a grievance, call toll-free, 1-888-648-7999 or TDD/TTY 1-800-735-8262.

You may also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available online at ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)
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