

NEWYORK-PRESBYTERIAN/LAWRENCE HOSPITAL NEWYORK PRESBYTERIAN MEDICAL GROUP/WESTCHESTER LAWRENCE COMMUNITY HEALTH SERVICES CHARITY CARE POLICY SUMMARY

NewYork-Presbyterian/Lawrence Hospital, including its subsidiaries, NewYork-Presbyterian Medical Group/Westchester, and Lawrence Community Health Services, has a long-standing policy to assist patients who receive health care services at our hospital and are in need of financial aid, regardless of age, gender, race, national origin, socio-economic or immigrant status, sexual orientation or religious affiliation.

IF YOU HAVE A FINANCIAL OBLIGATION TO NEW YORK – PRESBYTERIAN/LAWRENCE HOSPITAL, OR ONE OF ITS SUBSIDIARIES, AND BELIEVE YOU CANNOT AFFORD TO PAY, NYPLH HAS A CHARITY CARE POLICY WHICH CAN ASSIST QUALIFIED PATIENTS.

HOW DO I KNOW IF I QUALIFY FOR CHARITY CARE/FINANCIAL AID?

- Residents of New York State may qualify for Charity Care for medically necessary emergency services. Residents of Hospital's primary service area may qualify for Charity Care for medically necessary non-emergency services.
- The primary service area consists of the following counties: Westchester, Bronx, Orange, Putnam and Rockland.
- Patients who meet the above criteria and have incomes below the amounts shown below may be eligible for Charity Care/Financial Aid. Applicants may be asked for net assets, as defined in the Charity Care Policy.

PERSONS IN FAMILY OR HOUSEHOLD	INCOME (EFF. 1/31/2017)
1	\$48,240
2	\$64,960
3	\$81,680
4	\$98,400
FOR EACH ADDITIONAL PERSON, ADD:	\$16,720

- Charity Care eligibility generally will be determined upon completion of a Charity Care application.
- This Policy applies only to the charges of NYPLH, or the subsidiaries listed above. All other physicians and providers bill independently for their services.

WHAT KIND OF ASSISTANCE CAN I GET?

- Hospital will not charge patients eligible for its Charity Care program more than amounts generally billed (AGB), to individuals who have insurance for emergency or other medically necessary care. For all other care, an eligible individual may not be charged more than Hospital's gross charges. The Hospital calculates the AGB using the prospective method, and bases that rate on current New York State fee-for-service Medicaid rates.
- An installment payment plan will be made available to eligible patients.
- Once your application has been submitted, you may disregard any bills until we have rendered a decision on that application.

HOW CAN I APPLY OR GET ANSWERS TO MY QUESTIONS?

- The Charity Care Policy, Summary, and application are available in our registration areas and on our website at www.nyplawrence.org by clicking the Patient and Visitors tab and then the Hospital Bills and Insurance tab. The policy is available in English and Spanish.
- Information regarding eligibility for Charity Care and the application process is available at registration areas or by calling, **914-787-4008, or 914-787-2196, or 914-787-4003.**