

UChicago Medicine AdventHealth

UChicago Medicine AdventHealth Bolingbrook; UChicago Medicine AdventHealth Glen Oaks; UChicago Medicine AdventHealth Hinsdale; UChicago Medicine AdventHealth LaGrange; Employed physician practices in the Chicago service area.

Summary of Financial Assistance Policy

AdventHealth is committed to and respectful of each person's dignity with a special concern for those who struggle with barriers to access healthcare services. AdventHealth has an equal commitment to manage its healthcare resources as a service to the entire community. In furtherance of these principles, AdventHealth provides financial assistance for qualifying individuals who receive emergency or other medically necessary care from AdventHealth. This summary provides a brief overview of AdventHealth's Financial Assistance Policy.

Who Is Eligible?

You may be eligible for financial assistance if you are an Illinois resident. Financial assistance is generally determined by your total household income as compared to the Federal Poverty Level.

- If your total household income is less than or equal to 250% of the Federal Poverty Level, you may receive a 100% charity care write-off on the portion of the charges for which you are responsible.
- If you are uninsured and your income is above 250% of the Federal Poverty Level but does not exceed 600% of the Federal Poverty Level, you may receive discounted rates on a sliding scale.
- If you have insurance and your income is above 250% of the Federal Poverty Level but does not exceed 400% of the Federal Poverty Level, you may receive discounted rates on a sliding scale.
- If you have medical debt for emergency and medically necessary care that exceeds 20% of your income, you may be eligible for a discount.

If you have assets exceeding 600% of the Federal Poverty Level income amount, you may not qualify for financial assistance. Patients who are eligible for financial assistance will not be charged more for eligible care than the amounts generally billed to patients with insurance coverage.

What Services Are Covered?

The Financial Assistance Policy applies to an emergency and other medically necessary care. These terms are defined in the Financial Assistance Policy. All other care is not covered by the Financial Assistance Policy.

How Can I Apply?

To apply for financial assistance, you typically will complete a written application and provide supporting documentation, as described in the Financial Assistance Policy and the Financial Assistance Policy application.

How Can I Get Help with an Application?

For help with a Financial Assistance Policy application, you may contact AdventHealth by calling 844-652-0600, by email at GLR.CustomerService@AdventHealth.com or in writing at:

AdventHealth Patient Financial Services
Attention: Financial Assistance Department
1000 Remington Blvd., Suite 110
Bolingbrook, IL 60440

For visits on or after 10/29/2023, please call 800-462-0490 or mail to:

AdventHealth

Attn: Financial Assistance

PO Box 935979

Atlanta, GA 31193

We encourage you to download the AdventHealth app and create an account, which will allow you to apply online for financial assistance as well. If you do not have an AdventHealth account, visit account.adventhealth.com/register/.

How Can I Get More Information?

Copies of the Financial Assistance Policy and Financial Assistance Policy application form are available at <https://www.adventhealth.com/legal/financial-assistance-illinois> and at the facilities listed above. Free copies of the Financial Assistance Policy and Financial Assistance Policy application can also be obtained by mail by writing to the address shown above. Additional information about the Financial Assistance Policy also is available by email at GLR.CustomerService@AdventHealth.com or by telephone at 844- 652-0600.

What If I Am Not Eligible?

If you do not qualify for financial assistance under the Financial Assistance Policy, you may qualify for other types of assistance. For more information, please contact AdventHealth by telephone at 844-652-0600; or by email or in writing as described above.

Translations of the Financial Assistance Policy, the Financial Assistance Policy application and instructions, and this plain language summary are available in the following languages on our website and upon request:

English; Español (Spanish); Polski (Polish); Tagalog (Filipino); 简体中文 (Simplified Chinese);
한국어 (Korean);