

Lower Umpqua Hospital is a non-profit facility, committed to providing quality medical care to people residing within our local hospital district, regardless of ability to pay. *Financial assistance is secondary to all other financial resources available, including insurance, government programs, third-party liability, and assets. You may be asked to show proof of denial from such programs before your application can be approved.* Assistance is granted for non-elective medically necessary procedures only.

Please fill out the enclosed Financial Assistance application. Once completed, you can <u>contact our Financial Counselor to discuss the application or drop your application off at our Business Office. If you need assistance filling out the required forms our Financial Counselor can assist you. Our office hours <u>are 7:30am - 12:00pm & 1:00pm - 3:30pm Monday through Friday</u>. Please bring, email, or fax the required financial documentation to avoid any delays in processing.</u>

The following documentation is required to complete the Financial Assistance process:

- 1. A copy of the most recent tax returns filed. If taxes are not filed, please attach a note stating that you do not file taxes and for what reason.
- 2. Proof of Oregon residency in the form of a copy of your Oregon driver's license or a utility bill showing your address.
- 3. Proof of income such as the following documents:
 - Proof of Social Security or Retirement income
 - Last 3 months pay stubs for household family members over the age of 18
 - Unemployment or workers' compensation award letters
 - AFS award letter or disability award letter or any payment vouchers you receive
 - If self-employed, Schedule C and/or profit and loss statement
 - If Patient (household) does not have Income: Letter of (financial) support.
- 4. All Patients must provide copies of the most recent statements for the following (if applicable):
 - Checking and/or Savings Accounts statements for the last three (3) months
 - Health Savings Accounts (HSA), Medical Savings Accounts (MSA), Flexible Spending Arrangements (FSA), or Health Reimbursement Arrangements (HRA)

Once the application has been processed, you will be notified by mail whether you have or have not qualified for Financial Assistance. If you qualify, your bill will be reduced based on the approved discounted amount.

If you have any further questions, or need further assistance, please contact our Financial Counselor at **541-271-6384.**

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