St. Mary's Hospital

500 W. Court Street, Kankakee, IL 60901

Financial Assistance & Charity Care Program – Plain Language Summary

St. Mary's Hospital is committed to caring for the entire community. To support individuals who may not have health insurance or the financial means to pay for medical care, we offer a comprehensive **Financial Assistance & Charity Care Program**. This program reflects our commitment to providing compassionate, high-quality healthcare to all who qualify.

Financial assistance documents, including the policy, this plain language summary and application, are available in multiple languages and can be found on our website at: https://stmaryshospitalkankakee.org/financial-assistance/ .

Who Qualifies for Assistance?

- **Charity Care/Full Coverage (100% Discount):**
  Available to individuals or families with income at or below 350% of the Federal Poverty Level (FPL). Eligible patients may receive a 100% write-off of the portion of charges they are responsible for.
- **Financial Assistance/Partial Coverage (Discounted Rates):**
  May be available to those with income below 600% of the FPL. Eligible patients may receive discounted rates for emergency and medically necessary care.

How to Apply:

To be considered for financial assistance, patients must:

- Complete a Financial Assistance application and submit all required documentation as outlined on the form.
- Cooperate in good faith throughout the screening and application process, including responding promptly to any information requests from hospital staff.
- Provide all requested financial and supporting documentation within 30 days of the hospital's request.

Important Information:

- **Other Payment Sources**
  Before financial assistance can be considered, all other payment options must be used, including insurance, third-party payers, liability claims, workers' compensation, or other public programs.
- **Limited Provider Participation**
  Not all services or providers are covered under the hospital's Financial Assistance/Charity Care Program. Services provided by healthcare professionals who are out-of-network under your insurance plan, or providers who do not participate in the hospital's program, may not qualify.

Need Help or Have Questions?

Our patient representatives are available to assist with the application process and to answer any questions you may have, call **773-900-3289** or email **financialassistance@primehealthcare.com**.

Ready to Apply?

Mail the application and supporting documentation to:

St. Mary's Hospital
c/o Patient Financial Services-HBRC
3628 E. Imperial Hwy, Suite 104
Lynwood, CA 90262