



Here you will find information about the Financial Assistance Program offered through HealthPartners Clinics.

Please note that the form must be completed in its entirety in order to process. **In addition, we require:**

- A copy of your last federal tax return
- Copies of your two most recent pay stubs or earnings statements
- A copy of your most recent award sheet if you are currently receiving disability income
- An “Income Earnings Statement” for the Social Security Administration if you did not file tax forms last year (telephone number 1-800-772-1213)

If any of the requested information is not provided or is found to be inaccurate, your application for an extended payment plan or for assistance will be denied.

We will consider the information you provide and compare all data with the federal economic guidelines. You will receive written communication regarding your qualification status in approximately 10 – 14 days. Regardless of the outcome on this application, please note that we do expect that you will seek alternative methods for payment (insurance, medical assistance, etc.) for future expenses.

Thank you for using HealthPartners Clinics for your healthcare needs.

HealthPartners Medical Group
Patient Accounting