

HPMG Financial Assistance Program General Program Requirements

Policy Statement

HealthPartners Medical Group & Clinics (HPMG) is committed to meeting the healthcare needs of the community. As part of this mission, we administer a financial assistance program to help patients who need medical care but have difficulty with related medical expenses. In our facilities, non-elective professional medical services will be provided without regard to the patient's ability to pay and financial assistance will be made available.

General Program Requirements

1. To be eligible for program assistance the patient must qualify as described here in or have been approved for Regions Hospital Financial Assistance Program. Program eligibility is based on income, assets, liabilities and family size. Specific options available to you are based on the balance owed.
2. In order to be eligible, patients must apply for and use all government program assistance. Patients must comply with Medical Assistance application process. Staff in clinic, (such as Insurance Financial Technical Assistant (IFTA), etc.) can assist patients with Medical Assistance qualification guidelines and provide an application if needed.
3. If patient is denied government assistance based on income guidelines, the patient may complete the HPMG Financial Assistance Program application and HPMG Patient Accounting will review and process.
4. HPMG Patient Accounting will review application and all required supporting documentation. The approval process takes about 10-14 days. You will receive communication in writing of program approval and associated discount or program denial and other payment options.
5. We have funding for patients that do not have any other sources of payment, but you may apply for the Financial Assistance Program if you have insurance coverage. Any discounts you would receive would be on balances remaining after insurance payment.
6. Accounts with an outstanding balance greater than \$500 will be actively worked by HPMG Patient Accounting; patients will be contacted and informed of payment plan options and the financial assistance program.
7. HPMG Sliding Discount Guidelines are based on the latest Health and Human Services (HHS) Federal Poverty Guidelines, up to 300% FPG level.
8. Application information will be reviewed every 90 days, and updated information may be required, in order to determine continued eligibility.