

**FINANCIAL ASSISTANCE ELIGIBILITY SUMMARY-2024**

**HOW TO GET AN APPLICATION:**

**WHO CAN APPLY**

- The Financial Assistance Program (FAP) policy provides free or discounted care for those who have tried all other payment options, and:
  - Have household income at or below 300% of the current year’s Federal Poverty Guidelines (see chart). Certain assets such as bank accounts may count toward this amount.
  - Have submitted a properly completed application within 8 months of the first post-discharge statement.
  
- Our Patient Advocate is available to help you complete the application.

- In person at Littleton Regional Healthcare located at:  
600 St. Johnsbury Road  
Littleton, NH 03561
- By calling our Patient Advocate at:  
(603)444-9560
- By visiting the LRH volunteer desk, emergency department or clinic offices
- By going online to:  
<http://www.littletonhealthcare.org/>

**FOR FREE COPIES OF THE POLICY AND APPLICATION**

- Use the contacts listed above.
  - Interpreter services for other languages are available.

**ADDITIONAL INFORMATION**

- Offices and physicians that accept the FAP are those which are LRH-owned.
- The FAP can only be applied toward medically necessary services.
- No patient that is eligible for assistance under our Financial Assistance Policy will be charged more for emergency or medically necessary care than amounts generally billed to individuals who have Medicare or private insurance coverage.
- If you have any questions, contact our Patient Advocate directly at (603)444-9560.

<b>2024 FEDERAL POVERTY LEVEL CHART</b>	
<b>Persons in Family/Household</b>	<b>300% of Poverty Guideline</b>
1	\$45,180.00
2	\$61,320.00
3	\$77,460.00
4	\$93,600.00
For each additional family/household member, add \$16,140.00	

