



# *Financial Assistance Policy – Plain Language Summary*

**Mayo Clinic Hospital — Rochester**

## **Financial Assistance Offered**

Mayo Clinic Hospital — Rochester's mission is to provide the best care for every patient. As part of this mission, Mayo Clinic Hospital — Rochester offers financial assistance through its Financial Assistance Policy to patients unable to pay for emergency or medically necessary care.

## **Eligibility Requirements and Assistance Offered**

Eligibility for financial assistance is based on multiple factors, including the nature of the condition and care required, insurance coverage or other sources of payment (including personal injury claims), income (Federal Poverty Level guidelines used to determine the amount of financial assistance offered), family size, assets, and any special consideration the patient or physician would like to have considered.

Financial assistance is offered to patients who are uninsured and underinsured. Partial or full financial assistance will be granted based on a patient's ability to pay the billed charges.

Patients must fully comply with the application process, including submitting tax returns, bank statements and pay stubs, as well as completing the application process for all available sources of assistance, including Medicaid or Medical Assistance.

## **How to Apply for Assistance**

The patient or any person involved in the care of the patient, including a family member or provider, can express financial concerns at any point during the patient's care. The patient or responsible party will then be encouraged to complete a financial assistance application.

Financial assistance is limited to medical care provided at a Mayo Clinic hospital location and by Mayo Clinic medical personnel. Expenses such as travel, food, lodging, durable medical equipment, and prescriptions are not covered under the Financial Assistance Policy. Mayo Clinic will uphold the confidentiality and dignity of each patient, and any information submitted for consideration of financial assistance will be treated as protected health information under the Health Insurance Portability and Accountability Act (HIPAA).

## **Where to Obtain Copies**

Mayo Clinic's Financial Assistance Policy and Application are available free of charge by calling Patient Account Services at 1-844-217-9591 and requesting a copy by mail or email. The policy and application are also available online at [www.mayoclinic.org/financialassistance](http://www.mayoclinic.org/financialassistance) for downloading and printing. Copies of the policy and application are also available at Admissions and Business Services areas for all Mayo Clinic hospital locations, as well as all Emergency Department locations.

## **Contact for Information and Assistance**

Additional information about the Financial Assistance Policy and assistance with the application process can be obtained from Patient Account Services:

- Online at [www.mayoclinic.org/financialassistance](http://www.mayoclinic.org/financialassistance) and select the Rochester link.
- You may also call 1-844-217-9591 or visit a business office location in Rochester, MN:
  - Mayo Clinic: Gonda Building, Lobby Level East
  - Mayo Clinic Hospital — Rochester, Methodist Campus: Eisenberg Building, Lobby Level
  - Mayo Clinic Hospital — Rochester, Saint Marys Campus: Mary Brigh Building, Main Floor

## **For Non-English Speakers**

Translations of the Financial Assistance Policy, Financial Assistance Policy Application and this Plain Language Summary are available at [www.mayoclinic.org/financialassistance](http://www.mayoclinic.org/financialassistance).

## **No More Than Amount Generally Billed (AGB)**

A patient determined to be eligible for financial assistance may not be charged more than amounts generally billed for emergency or other medically necessary care to patients who have insurance for such care.