



## **Notice of Patient Financial Assistance**

KPC Health offers financial assistance to patients who are uninsured or underinsured and meet certain criteria under our financial assistance policy. If you are facing financial hardship, we encourage you to apply to Medi-Cal or explore other government programs that may be of assistance. You may be eligible for financial assistance for medical necessary procedures performed at the Hospital if you have difficulty paying for healthcare services and do not qualify for Medi-Cal or other government programs. Our Patient Financial Services office can help determine if you qualify under our financial assistance policy. You may be eligible for free care if your household income is at or below 200% of the Federal Poverty Level. You may be eligible for discounted care if your household income is at or below 400% of the Federal Poverty Level.

For more information, please call Patient Financial Services at (714) 953-3507.

Please note the Hospital's financial assistance policy does not apply to services provided by physicians or other medical providers, including, without limitation, emergency room physicians, anesthesiologists, radiologists, hospitalists, pathologists, etc., whose services are not included in a patient's bill from the Hospital.

### **How to Apply**

Patients seeking free or discounted care will need to complete a Financial Assistance Application and submit any required documentation. The Application and documentation will go through a review process by the Hospital.

To obtain a copy of the Hospital's financial assistance policy and the Financial Assistance Application, you may ask representatives at the Hospital's registration or admissions desks, call Patient Financial Services at (714) 953-3507 or visit its business office at 1301 N. Tustin Ave., Santa Ana, CA 92705 Monday through Friday during the hours of 8:00 a.m. to 4:00 p.m., or visit <https://kpchealth.com/fin-aid/>

### **Pricing Transparency (Shoppable Services)**

Better manage your health care with the Patient Price Estimator tool. The online tool offers an intuitive way to estimate your out-of-pocket cost of care for common exams, procedures, tests, and services, empowering you to make informed financial decisions about your treatment.

The online tool can be found at <https://ptc.ipas360.net/kpc>

### **Help Paying Your Bill**

There are free consumer advocacy organizations that will help you understand the billing and payment process. You may call the Health Consumer Alliance at (888) 804-3536 or go to [healthconsumer.org](http://healthconsumer.org) for more information. The Health Consumer Alliance (HCA) is an independent consumer assistance program that offers free over-the-phone or in-person assistance to help people struggling to get or maintain health coverage and resolve problems with their health plans. HCA can assist you with applying for coverage such as Medi-Cal, Hospital Presumptive Eligibility, private insurance or Covered California.

### **Hospital Bill Complaint Program:**

The Hospital Bill Complaint Program is a state program which reviews hospital decisions about whether you qualify for help paying your hospital bill. If you believe you were wrongly denied financial assistance,

you may file a complaint with the Hospital Bill Complaint Program. Go to [HospitalBillComplaintProgram.hcai.ca.gov](http://HospitalBillComplaintProgram.hcai.ca.gov) for more information and to file a complaint.

**Language and Accessibility:**

If you speak another language or you have a disability and need an accessible alternative format for the above materials, please contact Patient Financial Services at (714) 953-3507 or visit its office at 1301 N. Tustin Ave., Santa Ana CA 92705 Monday through Friday during the hours of 8:00 a.m. to 4:00 p.m. and they can offer you an alternative format, including but not limited to, large print, braille, audio and other accessible electronic formats.