

## **The Menninger Clinic**

## Plain Language Summary of the Financial Assistance Policy

The Menninger Clinic is committed to providing free medically necessary care to eligible individuals without the ability to pay for their hospital services.

Patients who are seeking medically necessary care, as defined in the financial assistance policy, may apply for financial assistance by completing a financial assistance application.

Patients who qualify for financial assistance under the financial assistance policy will receive medically necessary care, as defined in the policy, at no cost to the patient. Patients qualifying for financial assistance will not be charged more than amounts generally billed to patients with insurance covering such care.

A determination for financial assistance will consider the following:

- Services to be provided
- Medical necessity
- o Income Level (between 300% and 375% of Federal Poverty Guideline)
- Household (as defined in the Financial Assistance Policy)
- Active payment plans to medical service providers

Copies of the financial assistance policy and the financial assistance application are both available, at no cost, on the Clinic's website at: http://www.menningerclinic.com/patient-care/financial-information

Translation of the financial assistance policy is available upon request.

Printed copies are also available at two of the Clinic's locations:

The Menninger ClinicThe Gathering Place12301 Main Street5310 S Willow Dr.Houston, TX 77035Houston, TX 77035

Additional information can be obtained by calling Admissions at 713-275-5000.