
WHAT'S AVAILABLE?

Free or low cost health care. Many health facilities must give health care to some people who cannot afford to pay. Hill-Burton facilities must post a sign that says "NOTICE-Medical Care for Those Who Cannot Afford to Pay" in the health facility's Admissions Office, Business Office and Emergency Room.

Who Can Get It?

You may qualify if your income falls within the Poverty Guidelines, published annually by the Department of Health and Human Services. You may also qualify at some facilities if your income is up to double the Poverty Guidelines (or triple the Guidelines for nursing homes).

Where Can You Get It?

At Hill-Burton assisted facilities including hospitals, nursing homes, clinics, etc. Apply at the Admissions Office or Business Office.

When Can You Apply?

At any time--before or after you receive care; even after a bill has been sent to a collection agency.

How Can You Receive It?

Ask for Hill-Burton assistance.

SERVICES AVAILABLE

■ Each Hill-Burton facility can choose which types of services to provide at no charge or reduced charge. They do this in an ALLOCATION PLAN published in the newspaper.

■ The facility must give you a written INDIVIDUAL NOTICE which will tell you what types of Hill-Burton free or reduced charge services it provides.

■ Only facility costs are covered, not your private doctor's bills.

■ Hill-Burton facilities must provide a specific amount of free or reduced charge care each year, but can stop once they have given that amount.

■ To obtain a list of Hill-Burton facilities in your area, call the HOT LINE telephone number.

ELIGIBILITY

■ If your income is less than the current Poverty Guidelines, facility services may be free.

■ If your income is greater than, but not more than double the Poverty Guidelines (or triple the Guidelines for nursing homes), Hill-Burton facilities may provide services at full charge, reduced charge, or free. The INDIVIDUAL NOTICE will tell you what income levels qualify for free care.

■ The facility may ask you to provide information to verify eligibility, such as proof of income.

■ Hill-Burton facilities must make a determination of your eligibility within a set time frame. Time frames depend on when a request is made and on whether the facility is a hospital, nursing home, or other type of facility. See the facility's INDIVIDUAL NOTICE for the time frame in place at the facility.

■ The facility must provide you with a written statement which says either when you can get free or reduced charge services or why you have been denied.

Follow these steps:

1. Ask facility personnel for a copy of the INDIVIDUAL NOTICE. (This notice will tell you exactly where in the facility to apply.)

2. Ask how to apply for Hill-Burton free care. The facility may request that you fill out an application.

3. If you are asked to furnish proof of income eligibility, give this information to the facility (a pay stub may be requested).

4. If you are asked to apply for Medicaid, Medicare, or some other financial assistance program, you must do so.

5. When you return the completed application, ask for a DETERMINATION OF ELIGIBILITY.

REASONS FOR DENIAL

The facility may deny your request...

- If your income is more than the current Poverty Guidelines, (or more than twice the Guidelines (or triple the Guidelines for nursing homes) if the facility provides Hill Burton services to persons with income up to these amounts).
- If the facility has given out its required amount of free care as specified in its ALLOCATION PLAN.
- If the services you requested or received are not covered in the facility's ALLOCATION PLAN.
- If the services you requested or received are to be paid by Medicare/Medicaid, insurance or other financial assistance program.
- If the facility asks you to first apply for Medicare/Medicaid or a financial assistance program, and you do not cooperate.
- If you do not give the facility proof of your income, such as a pay stub.

COMPLAINTS

■ You may file a complaint with the Department of Health and Human Services at the address on the back if you have reason to believe you have been unfairly denied Hill-Burton free care.

■ A complaint must be in writing. It can be a letter that simply states the facts and dates concerning the complaint.

■ You may call your local legal aid services for help in filing a complaint.

WHAT'S HILL-BURTON FREE HEALTH CARE ABOUT?

In 1946, Congress passed a law which gave hospitals and other health facilities money for construction and modernization. In return, the facilities that received these Hill-Burton funds agreed to (1) provide a reasonable volume of services to persons unable to pay, and (2) make their services available to all persons residing in the facility's area. The Department of Health and Human Services (HHS) is responsible for the administration of this program.

The following is a simplified explanation of the Hill-Burton program at most health facilities. Some Hill-Burton facilities may use different eligibility standards and procedures. For additional information, call the HOT LINE.

The HOT LINE Toll Free number is:

1-800-638-0742

or

for Maryland Residents

1-800-492-0359

Our internet website at

www.hrsa.gov/osp/dfcr

continually updates the list of obligated facilities and provides other information about this program.

Hill-Burton facilities must provide services without discrimination on the basis of race, color, national origin, or creed. They also may not discriminate against Medicare or Medicaid patients. For more information about the Community Service Assurance, you may call the Office for Civil Rights. Their Toll Free number is: 1-800-368-1019.

TO FILE A COMPLAINT WRITE TO:

**Director
Division of Facilities Compliance
and Recovery
5600 Fishers Lane, Room 10C-16
Rockville, MD 20857**



FREE

HOSPITAL CARE NURSING HOME CARE

and CARE PROVIDED IN OTHER TYPES
OF HEALTH FACILITIES
UNDER THE HILL-BURTON PROGRAM

