Financial Assistance Programs and Required Documentation

As part of Rush University Medical Center’s mission to provide comprehensive, coordinated health care to our patients, we offer several financial assistance programs to help patients with their health care costs for medically necessary services.

Amount Generally Billed (AGB)
Individuals who are determined to be eligible for financial assistance will never be charged more than the amount generally billed (AGB) to individuals who have insurance. The current AGB payment rate as a percentage is available online at rush.edu/financial-assistance/AGB.

Ways to contact Rush
For pricing and Financial Assistance questions:
Financial Counselors:
Rush University Medical Center
1653 W. Congress Pkwy
Rm. 450 Atrium Bldg.-Attn: Financial Counselors
Chicago, Illinois 60612
Phone: (312) 942-5967
Email: financial_counselor@rush.edu

Rush Oak Park Hospital
520 S. Maple Ave
Registration Department -Attn: Financial Counselor
Oak Park, Illinois 60304
Phone: (708) 660-5603

For billing questions:
Customer Service Representatives:
Phone: (312) 942-5693
(866) 761-7812
Email: billing_info@rush.edu
MyChart: http://mychart.rush.edu

Access Rush's Financial Assistance Policy & Application:
Online: www.rush.edu/financial-assistance
Via Mail: request from Customer Service
In Person: visit the Admitting Departments, Emergency Departments, or Financial Counselor Offices

Completed Financial Assistance applications and required supporting documentation are accepted by:

Uploading to MyChart: http://mychart.rush.edu
Email: financial_counselor@rush.edu
Mail: use the Financial Counselor Department address referenced above

*Financial Assistance Policy, Application, and Summary are available in English, Spanish, Mandarin Chinese, and Polish

For more information on Financial Assistance at Rush, please visit our website:
www.rush.edu/financial-assistance
FINANCIAL ASSISTANCE PROGRAMS

Charity Care – Hospital bill is reduced up to 100% and is subject to all required supporting documentation.
- Family Income is 201% - 300% of the Federal Poverty Guidelines.
- The patient is eligible for Medicaid for other dates of service.
- The patient does not qualify for any state and/or federal assistance program.
- Charity Care is initially automatically approved for a period of 3 months or for the duration of the current treatment plan. It can be renewed on an annual basis, but will require re-applying.

Limited Income – Hospital bill is reduced by 75%.
- Family Income is 301% - 400% of the Federal Poverty Guidelines.

Presumptive Charity Care – Hospital bill is reduced by 100% on an episodic basis. You are not required to complete an application if you meet any of the following criteria:
- Family Income is 0% - 200% of the Federal Poverty Guidelines.
- Enrolled or eligible for an assistance program for low income individuals (WIC, SNAP, IL Free Breakfast/Lunch Program, or Low Income Home Energy Assistance Program or Community Based Medical Assistance or receiving Grant Assistance.)
- Homeless, deceased with no estate, mental incapacitation with no one to act on your behalf.

Providers – The discounts associated with the Financial Assistance Program are only applicable to hospital and professional services provided by Rush University Medical Center, Rush Oak Park Hospital, Rush University Medical Group and Rush Oak Park Physician Group.

REQUIRED SUPPORTING DOCUMENTATION FOR FINANCIAL ASSISTANCE

- Fully Completed and signed Application for Financial Assistance.
- Valid Photo-ID which may include Driver’s License, State-issued ID, Government-issued ID, Military ID.
- Proof of permanent residency in Rush’s Catchment Area.
  - Rush’s Catchment Area is the State of Illinois and the three collar counties of Indiana (Lake, LaPorte and Porter).
  - Documentation of residency (any one of the following): Driver’s license, rent receipt or lease, recent utility bill with address, government-issued mail, letter from homeless shelter or Voter Registration card.
- Tax documents (ALL required): Most recent federal tax return (including all schedules) and most recent W-2 and 1099 forms.
- Proof of Assets (ALL applicable documents are required): Checking/Savings Accounts, Stocks, Certificates of Deposit, Mutual Funds, Health Savings/Flexible Spending Accounts or Credit Union Accounts.
- Applicants may be responsible for an annual payment if assets exceed certain thresholds.
- Proof of Family Income (ALL required for patient/guarantor and each household member): Copies of 2 months of recent pay stubs, written income verification, if paid in cash, including spouse/partner.
- Documentation of Assets are required if the income is between 201% and 400% of the Federal Poverty Guidelines. Non-retirement assets only.

Uninsured Program – For the uninsured patient, the hospital bill can be reduced by 50% or 68%. Discounts are associated with family income levels and proof of residency:
- Family income is 201% - 600% of the Federal Poverty Guidelines.
- 68% for Illinois residents (Rush’s Catchment Area)
- 50% for Non-Illinois residents
- Family income is greater than 600% of the Federal Poverty Guidelines.
- 50% for both Illinois and Non-Illinois residents.

Non-Covered Discount
- Patients are eligible for a 50% discount or if available, packaged pricing on non-covered services and services that are not medically necessary.

International Patients – The hospital bill for patients permanently residing outside the U.S. is reduced by 20%.

Payment Plans – Financial Counselors or Customer Service Representatives will work with the patient to determine an appropriate monthly payment plan.

*Patients can also set up self-service payment plans at: http://mychart.rush.edu

*For more information, please visit our website: www.rush.edu/financial-assistance