

Financial Assistance Program Plain Language Summary

Overview: UCLA Health strives to provide quality patient care and meet high

standards for the communities we serve. This policy demonstrates UCLA Health's commitment to our mission and vision by helping to meet the needs of low income, uninsured and underinsured patients in our

community.

UCLA Financial Assistance Program (Charity Care)

The Financial Assistance Program, also known as Charity Care, was designed to help meet the needs of low income, uninsured and underinsured patients in our community.

Eligible Services – The Financial Assistance Program applies to emergency or other medically necessary healthcare services provided and billed by UCLA Health. Separately-billed physician professional services furnished in inpatient, outpatient, and emergency hospital departments are not eligible for consideration under the Financial Assistance Program.

Determination of Eligibility – Eligibility is determined based on review of a completed Financial Assistance Application and supporting documents, including proof of income, assets and liabilities. Generally patients with family income at or below 400% of the Federal Poverty Level will be eligible for a discount of 100%. Patients with family income between 401% and 450% of the Federal Poverty Level may be eligible for a partial discount based on income level. If you receive financial assistance under our policy, you will not be charged more for emergency or other medically necessary care than the amount generally billed to patients having Medicare fee-for-service coverage. In some instances, patients may be presumptively determined eligible for financial assistance.

How to Obtain Copies of our Financial Assistance Policy and Application

You may obtain a copy of our Financial Assistance Policy and Application:

| On the UCLA Health website at |
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| uclahealth.org/billing. |
| In our Emergency Departments, Patient |
| Access Services Department (see address |
| below), any UCLA Health location where |
| patient registration occurs and in our Patient |
| Business Services Office (see address |
| below). |
| To request documents by mail contact the |
| Patient Business Services Office at |
| (310) 825-8021 Monday through Friday |
| 8:30 am to 4:00 pm. |

How to Obtain Information and Assistance Regarding Our Financial Assistance Program

For information regarding our Financial Assistance Program or assistance with the Financial Assistance Application contact our Patient Business Services Office at (310) 825-8021 (Monday through Friday, 8:30 am to 4:00 pm), or visit us at 10920 Wilshire Blvd., Suite 1600, Los Angeles, CA 90024.

Languages/Translations

The Financial Assistance Policy, Financial Assistance Application (also called the "Patient Financial Information Form"), and Plain Language Summary are available in English, Spanish, Farsi, Chinese and Arabic at uclahealth.org/billing, or in paper upon request. If you would like an interpreter to help you with a different language, please contact our Interpreter Services Program at (310) 267-8001.

How to Apply for our Financial Assistance Program

Completed Financial Assistance Application with all supporting documents can be hand-delivered or mailed to:

Hand-delivery: Monday-Friday, 8:30 am to 4 pm

Patient Access Services Department 757 Westwood Plaza Los Angeles, CA 90095

Patient Business Services Department 10920 Wilshire Blvd., Suite 1600 Los Angeles, CA 90024

Mail to:

Patient Business Services Department 10920 Wilshire Blvd., Suite 1600 Los Angeles, CA 90024