



Thank you for choosing LifeBridge Health as your healthcare provider. Our Patient Financial Services Department is available to assist patients who do not carry medical insurance (uninsured) or face significant co-payment, coinsurance and/or deductible charges, which may be challenging to manage due to personal hardship or financial distress. Depending on the specific financial situation, a patient may be eligible to receive Maryland Medical Assistance (Medicaid), Financial Assistance or take advantage of extended payment plans.

Financial Assistance Eligibility Criteria - Based on your circumstances and program criteria, you may qualify for full or partial assistance from LifeBridge Health. To qualify for full assistance, you must show proof of income 300% or less of the federal poverty guidelines; income between 301% - 500% of the federal poverty guidelines may qualify you for Financial Hardship Reduced Cost Care, which limits your liability to 25% of your gross annual income. Eligibility is calculated based on the number of people in the household and extends to any immediate family member living in the household. You may also qualify for presumptive eligibility if you are a beneficiary/recipient of a means-tested Federal, State or Local social service program. Financial Assistance covers uninsured patients and liability after all insurance(s) pay. Approvals are granted for twelve months. Patients are encouraged to re-apply for continued eligibility.

Where to Find Information - To obtain a Financial Assistance application and cover letter:

- ask a member of our Registration Staff
- visit our Customer Service Representatives in the main lobby of the Hospital
- call Customer Service at (410) 601-1094 or (800) 788-6995 (M-F 7:30 AM – 5:00 PM)
- visit www.lifebridgehealth.org

How to Apply - Complete the application in accordance with the instructions on the cover letter and return the application and required documentation to our Customer Service Representatives in the main lobby or mail to:

LifeBridge Health, Inc.

Financial Assistance Representative

2401 West Belvedere Avenue

Baltimore, Maryland 21215



Appeals and Complaints – You may file an appeal or complaint to the mailing address, email or Customer Service phone number(s) above. Patients may file a complaint against the hospital for an alleged violation of its financial assistance policy at hsrc.patient-complaints@maryland.gov. You may also file a complaint with the Maryland Health Education and Advocacy Unit at (410) 528-1840 or HEAU@oag.state.md.us.