

Receive in-person assistance by going to one of the following locations:

Dartmouth Hitchcock Medical Center

Patient Financial Services/Main Mall
One Medical Center Drive
Lebanon, NH 03756

Dartmouth Hitchcock Clinics Concord

Financial Counselor/Level 1
253 Pleasant Street
Concord, NH 03301

Dartmouth Hitchcock Clinics Manchester

Financial Counselors/East and West Level 1
100 Hitchcock Way
Manchester, NH 03104

Dartmouth Hitchcock Clinics Nashua

Financial Counselor/Level 1
2300 Southwood Drive
Nashua, NH 03063

Alice Peck Day Memorial Hospital

Registration/Financial Counselor
10 Alice Peck Day Drive
Lebanon, NH 03766

Cheshire Medical Center

Registration/Cashiers Main Lobby
580 Court Street
Keene, NH 03431

Mt Ascutney Hospital and Health Center

Financial Counselor
289 County Road
Windsor, VT 05089

New London Hospital

Financial Counselors/Reception
273 County Road
New London, NH 03257

Call one of our patient advocates at:

(844) 647-6436

Please send completed applications to:

Dartmouth Hitchcock Medical Center

Attn: PFS - Level 3 - FAA
One Medical Center Drive
Lebanon, NH 03756-0001

Cheshire Medical Center

Attn: PFS - FAA
580 Court Street
Keene, NH 03431

Mt Ascutney Hospital and Health Center

Attn: Financial Counselor
289 County Road
Windsor, VT 05089

New London Hospital

Attn: Financial Counselor
273 County Road
New London, NH 03257



dartmouth-hitchcock.org/patients-visitors/financial-assistance



Financial Assistance Policy



Do you need assistance to pay your bill for emergency or medically necessary care at a Dartmouth Health facility?

You may be eligible for financial assistance.

Dartmouth Health offers free or discounted charity care for emergency or other medically necessary services provided to patients who qualify. Patients who are determined eligible for financial assistance may not be charged more for emergency or other medically necessary care than amounts generally billed to patients covered by insurance for the same care.

Financial Policy

Dartmouth Health provides care for emergency medical conditions and medically necessary services to individuals regardless of their ability to pay, eligibility for financial or government assistance, age, gender, race, immigration status, sexual orientation or religious affiliation. We provide financial assistance to persons who (i) are residents of New Hampshire or Vermont, or non-residents who experience a medical emergency while in the area; do not have insurance or who have health insurance but need financial assistance to help cover out-of-pocket medical expenses such as deductibles, co-pays and co-insurance; are ineligible for any government healthcare benefit program; and meet financial eligibility

criteria as described in our Financial Assistance Policy. Local conditions or exclusions may apply as further described in our Financial Assistance Policy. Patients are expected to cooperate with the procedures for obtaining financial assistance or accessing other sources of payment, and to contribute to the cost of their care based on their ability to pay. Individuals who can purchase health insurance are expected to do so, to ensure access to healthcare services that benefit their overall health as well as provide protection for their personal assets.

How and when to apply for financial assistance?

You can apply at any point during your care or the subsequent collections cycle. However, we strongly encourage applications to be completed prior to appointments. Patient advocates can assist you in identifying and applying for insurance coverage or other resources and with completing an application for financial assistance. If you have a remaining balance after exhausting all other coverage options, you may be eligible for financial assistance. An application can be requested in person, over the telephone: **dartmouth-hitchcock.org/patients-visitors/financial-assistance**.

Discounted rate

If you do not qualify for financial assistance, you may still be eligible for the uninsured discount or other discounts according to our policy. This uninsured discount is applied prior to billing the patient and applying any financial assistance adjustments. The discount is based on the “look-back medicare fee for service plus private payors” method as described under applicable regulations implementing Section 501(r) of the Internal Revenue Code. Discount rates may vary by facility.

How is financial assistance determined?

The amount of financial assistance you receive is based upon your total gross income and assets compared to the federal poverty guidelines. You may qualify: If your family income is at or below 400% of the Federal Poverty Limit; issued by the U.S. Department of Health and Human Services and updated on a yearly basis; or If you believe that your assets, liquid assets and other available resources are not enough to cover the cost of your care. At your request, a financial application form or a copy of the Financial Assistance Policy will be mailed to you at no charge. Also, these documents and this summary are available on our website, at **dartmouth-hitchcock.org/patients-visitors/financial-assistance**.

These documents are also available in the following languages: Spanish, French, Portuguese, Chinese, Greek, Vietnamese, Nepalese, Arabic, Russian, Bosnian, Korean, Lao, Somali, Swahili, and Thai.