



Fred Hutchinson Cancer Center Patient Financial Assistance Policy Appendix II – Criteria for Tiered Financial Assistance Awards

In accordance with WAC 246-453-040, the Applicant's family size and income will be reviewed and will determine Percentage of Federal Poverty Level (FPL), this percentage will determine the level of financial assistance to be awarded based on the date of service. Applicants (patients or their guarantors) will be eligible for financial assistance for the patient responsibility portion of their hospital charges equal to the unpaid balance remaining after all sources of third party coverage and sponsorship have been exhausted.

For medically necessary care prior to July 1, 2022, FHCC will consider patients for Financial Assistance and charity care under this policy, when third-party coverage, if any, has been exhausted, based on the following criteria and determination will be based on their income adjusted for family size, in the following amounts:

- income is not more than 300% of the FPL, will be eligible for financial assistance in the full (100%) amount.

For medically necessary care received on or after July 1, 2022, FHCC will consider patients for financial assistance and charity care under this policy, when third-party coverage, if any, has been exhausted, based on the following criteria and determination will be based on their income adjusted for family size, in the following amounts as defined by RCW 70.170;

- income is not more than 300% of the FPL, will be eligible for financial assistance in the full (100%) amount.
- income is between 301% and 350 % of the FPL, will be eligible for financial assistance to a 75% discount.
- income is between 351% and 400% of the FPL, will be eligible for financial assistance to a 50% discount.