



Effective: June 2025

Financial Assistance/Sliding Fee Scale Policy

Policy:

It is the policy of New Hampshire Oncology-Hematology, P.A. to provide essential services, regardless of the patient's ability to pay. We offer financial assistance for qualifying patients without health care coverage or with inadequate coverage. Discounts are offered based on family size and annual income.

Procedure:

Patients that are identified through our intake process as having no insurance or who are underinsured, are eligible to apply for financial assistance. Patients will be required to complete and submit a financial assistance application, and our finance and billing staff will determine if the patient is eligible for a discount. The discount will apply to all services received at NHOH, but not those services/products that are purchased outside of NHOH, including medications. Medications administered in the clinic WILL BE PRICED AT THE COST TO THE PRACTICE. We will attempt to obtain free drug from vendors/foundations when available, but it is not always possible.

The application must be completed every 12 months or if the patient's financial situation changes.

Eligibility Criteria:

Patients will be eligible for a self-pay sliding fee scale when:

1. They have no health insurance coverage of any kind, including federal and state health care programs such as Medicare and Medicaid or other such coverage provided by a school, homeowner's policy, supplemental insurance carrier;
2. They are not eligible for worker's compensation coverage;
3. They do not claim third party liability for their treatment;
4. They have no other responsible party;
5. They meet the household income guidelines as illustrated below.

This policy will not apply to patients with insurance benefits that already discount billed charges to an 'allowed amount'. Amounts due according to the insurance plan Explanation of Benefits (i.e., deductible, co-insurance, and/or copayment) are ineligible for self-pay discounts.

Household/ Family Size	100% FPL	101%-125%	126%-150%	151%-175%	176%-250%	251% AND GREATER
2025 Federal Poverty Guidelines	FEDERAL POVERTY LEVEL - Monthly Income	FEDERAL POVERTY LEVEL - Monthly Income	FEDERAL POVERTY LEVEL - Monthly Income	FEDERAL POVERTY LEVEL- Monthly Income	FEDERAL POVERTY LEVEL- Monthly Income	FEDERAL POVERTY LEVEL – Monthly Income
1	\$1,304	\$1305-\$1629	\$1630-\$1968	\$1969- \$2294	\$2295- \$3272	\$3273 and up
2	\$1,763	\$1764-\$2202	\$2203-\$2660	\$2661- \$3101	\$3102- \$4423	\$4424 and up
3	\$2,221	\$2212-\$2775	\$2776-\$3352	\$3353- \$3908	\$3909- \$5573	\$5574 and up
4	\$2,679	\$2680-\$3348	\$3349- \$4045	\$4046- \$4714	\$4715- \$6724	\$6725 and up
5	\$3,138	\$3139-\$3921	\$3922- \$4737	\$4738- \$5521	\$5522- \$7874	\$7875- and up
6	\$3,596	\$3597-\$4494	\$4495- \$5429	\$5430- \$6328	\$6329- \$9025	\$9026- and up

Sliding Scale Fee Schedule				
Federal Poverty Level	Fee for New Patient Visits	Fee for Office Visits	Fee for Chemo Administration	Fee for Non-chemo Injections
100% OR BELOW	0	0	0	0
101-125%	\$50	\$20	\$55	\$25
126-150% FPL	\$75	\$40	\$80	\$50
151-175% FPL	\$100	\$60	\$110	\$75
176-250% FPL	\$125	\$80	\$140	\$100
>251% FPL	\$150	\$100	\$175	\$125

DRUGS WILL BE PRICED AT THE COST TO THE PRACTICE. We will attempt to obtain free drug from vendors/foundations when available, but it is not always possible.

Eligibility Criteria:

Self-pay patients will be identified when they make the initial contact with the office and are required to pay a deposit for their visit at time of check in.

A Self-pay patient is defined as a patient who:

i) has no health insurance coverage of any kind, including federal and state health care programs such as Medicare and Medicaid or other coverage such as insurance provided by a school, AFLAC, or homeowner's policy.

ii) does not participate in any health care sharing program (i.e. Medi-Share)

iii) applies for free drug when applicable (with assistance from our practice)

Upon Financial Advocate assessment, patients will be made aware of their responsibility for payments of the visits and treatment (if applicable) and will set up a payment plan with the patient.