

Texas Health Hospital

# Request for Financial Assistance

Dear Patient and Family,

In keeping with our mission and core values, Texas Health Hospital is committed to providing health care is provided to all patients regardless of medical condition, acuity, age, race, gender and or ability to pay.

We recognize that medical bills may be difficult to pay and at times, assistance is needed. If you do not have health insurance or are concerned that you may be unable to pay for all or part of your health care service, you may apply for our financial assistance program by completing the items in the list below. If you have questions, please call Customer Service Department at 1-972-810-0700.

We will work with you to see if you qualify for Medicare, Medicaid, Veterans Administration, Disability and many more.

Please provide the following information for consideration:

- Current month and two months prior pay stubs for household
- Copy of letter showing the amount you receive monthly in disability, workman's comp or unemployment
- Last three months bank statements proving any monthly income
- Most recently filed personal income tax return and current profit and loss statement (if applicable)
- Notarized letter of support - if do not have any income and being supported by someone else

Please complete the application and return it with the supporting documentation to:

## Texas Hospital Financial Assistance Program

1401 E. Trinity Mills Rd., Carrollton, TX 75006

**Without the above listed items, we may not be able to process your application**

Please return this application within 20 days of your initial bill. We will notify you in writing of our decision.

Sincerely,

Texas Health Hospital

1401 E. Trinity Mills Rd  
Carrollton, TX 75006  
972-810-0700

