Financial Assistance Summary

Ohio Hospital Care Assurance Program (HCAP)

As a participant in HCAP, we offer emergency and other medically necessary services free of charge if you are a resident of Ohio and your income is at or below 100 percent of the Federal Poverty Guidelines (FPG).

Our General Financial Assistance Policy

In addition to HCAP, under the Licking Memorial Health Systems (LMHS) Financial Assistance Policy, we provide financial assistance for emergency and other medically necessary care on a sliding scale, if you are a resident of Licking County and your family income does not exceed 250 percent of the FPG. If you are eligible for financial assistance under our policy, you will receive free or discounted care according to the chart below.

Annual Family Income	Amount of Discount
Less than 100% FPG	100%
100% - 150% FPG	80%
150% - 200% FPG	50%
200% - 250% FPG	45%

Charges Will Not Exceed Amounts Generally Billed (AGB)

If you are eligible for assistance under our Financial Assistance Policy, you will not be charged more for emergency or other medically necessary care than the amount we generally bill patients who have insurance.

How to Obtain Information and Assistance Regarding Our Financial Assistance Policy

The Financial Assistance Policy and Application are available online by logging into MyChart at MyChart.LMHealth.org, by visiting LMHealth.org and clicking on "Assistance & Financial Aid" under Quick Links, or by calling Patient Financial Services at (220) 564-1500. If you provide your mailing address to one of our patient account representatives, upon request, we will mail you a copy of our Financial Assistance Policy and/or Application free of charge. To be considered under our Financial Assistance Program, you must complete a Financial Assistance Application.

1900-5007 07/21/2021