

Financial Assistance Summary

Bryan Health is committed to always be there for all who turn to us for care, including those who are unable pay. We encourage patients to apply for financial assistance if they believe that they are unable to pay all or part of their bill. The following is a summary of our financial assistance policy.

Eligibility Requirements for Financial Assistance

Patients may be eligible for financial assistance if they:

- Are uninsured or underinsured;
- Ineligible for any government health care benefit program;
- Demonstrate they have financial need;
- Cooperate with Bryan Health policies and procedures; and
- Supply all required information to process the application.

Healthcare Services Eligible for Financial Assistance

- Emergency medical services provided in the emergency room;
- Services for a condition which, if not properly treated, would lead to an adverse change in the health status of an individual.
- Non-elective services for urgent life-threatening conditions; and
- Other medically necessary services, evaluated on a case-by-case basis.

Assistance Offered under the Financial Assistance Policy

1) Charity Care Financial Assistance

The level of assistance that Bryan Health provides to patients is based on federal poverty guidelines. If a patient's income is at or below 200 percent of the federal poverty guidelines, the patient is eligible for 100 percent financial assistance.

2) Uninsured Patient Discount:

Bryan Health hospitals offer an Uninsured Patient Discount to patients who are uninsured. Please note: Bryan Health's patients who do not have insurance are never charged more for services than the amounts generally billed to those who have insurance.

Applying for Financial Assistance

To apply for financial assistance:

1. Complete the Financial Assistance Application form. You may obtain a copy of the financial assistance policy, and financial assistance application form, through the mail by calling a patient financial counselor at the numbers listed below, or on our website at www.bryanhealth.com. Spanish translations of these forms are also available by request.
2. Attach supporting documents, listed on the application, to prove your income.
3. Mail your completed application and necessary documents to the address listed on the application.

Need help or have questions?

Contact information is listed below for facility staff who can provide additional information regarding Bryan Health's financial assistance program:

For Bryan Medical Center, Bryan Heart or Bryan Physician Network:

- To speak to a Patient Financial Counselor call: 877-577-9277 or 402-481-5791, or visit the Patient Accounts/Cashiers' Office at the hospital.
Address: Patient Financial Services, 2300 S 16th St., Ste. 400, POB, Lincoln, NE 68502

Crete Area Medical Center

- To speak to a Patient Financial Counselor call: 877-577-9277 or 402-481-5791, or visit a counselor in the Patient Access Office at the hospital.
Address: Patient Access Office, 2910 Betten Dr, Crete, NE 68333

Merrick Medical Center

- To speak to a Patient Financial Counselor call: 877-577-9277 or 402-481-5791, or visit the Patient Financial Services Office at the hospital.
Address: Patient Financial Services, 1715 26th St., Central City, NE 68826