

Financial Assistance Policy – Plain Language Summary

The Covenant Health financial assistance policy shows how eligible patients can receive partial or full discounts for emergency care and medically necessary hospital care.

Engible Services
All emergency care and other medically necessary care is eligible for assistance, except these services:
☐ Services covered by other programs
☐ Services covered by insurance
☐ Services that are not medically necessary
How to Apply
☐ Ask for an application at any Covenant Health facility's registration area.
☐ Calling 931-459-7614 and ask for an application to be mailed to you.
☐ Send a request by mail to:
Cumberland Medical Center
Attn: Box 110
421 South Main Street
Crossville, TN 38555
Download an application at www covenanthealth com or www cmchealthcare org

If you need assistance with the application process, please contact any of the above.

Will I be Eligible for Assistance?

Patients are eligible for financial assistance based on their income level and assets. Patients with family income and assets of up to 200% of the Federal Poverty Level may be eligible for a discount of 100%. Patients with family income and assets of 200 - 300% of the Federal Poverty Level may be eligible for a discount of 90%.

To request a copy of the financial assistance policy, call 931-459-7614. Eligible patients will not be charged more for emergency care or other medically necessary care than the Amounts Generally Billed (AGB) for patients who have insurance.

This information, the Financial Assistance Policy, and Financial Assistance application can be found in Spanish at the locations listed above.