



## FINANCIAL ASSISTANCE PROGRAM OVERVIEW

### Financial Assistance Eligibility

Idaho Health Neighborhood Center (IHNC) provides financial assistance for qualifying patients who need help paying for urgent, emergent or medically necessary care they received at IHNC.

To be eligible for Financial Assistance, the patient must:

- Complete the Financial Assistance Application & Determination form and submit supporting documentation.
- Have a family income at or below 250% of the Federal Poverty Level
- Receive medically necessary services, as determined by an IHNC provider

### How do I apply?

Request an application from any of the following sources: (Available in English or Spanish)

- Ask at IHNC Registration Desk
- Download an application through IHNC's website: [healthneighborhoodcenter.org](http://healthneighborhoodcenter.org)
- Call IHNC Clinic at (208) 606-0396

Applications will be reviewed only after all required documents have been submitted. Eligibility will be determined according to IHNC's Financial Assistance Policy. Incomplete applications will not be considered.