Help Paying Your Bill

Eligibility

Valley Children's Hospital is committed to providing high-quality, comprehensive healthcare services to children, regardless of their ability to pay. Valley Children's Hospital's Financial Assistance Program is intended to assist patients and guarantors who are not able to pay for their care, based upon a determination of financial need. Financial assistance will be considered for those individuals who are uninsured, underinsured, ineligible for any government health care benefit program, a patient whose injury is not compensated by workers' compensation, automobile insurance, or other insurance as determined and documented by the hospital and/or unable to pay for their care. Financial assistance is granted when patients have been determined eligible, based on providing proper documentation.

Type of Assistance

Patients found eligible for financial assistance may be granted full assistance or a partial discount equivalent to no more than Medi-Cal rates.

Fees Charged to Eligible Patients for Financial Assistance

Patients eligible for financial assistance will not be expected to pay more than the rates generally allowed for patients covered by Medi-Cal. The limit of fees applies to the patient payment obligations for emergent and medically necessary care.

How to Apply

To obtain an application or apply for assistance please contact:

Patient Financial Services Department

Available Monday – Friday, 9 a.m. – 4 p.m.

Valley Children's Hospital

9300 Valley Children's Place

Madera, CA 93636

559-353-7009

More Help

To understand the billing and payment process, Valley Children's Financial Assistance Policy and application are available at: valleychildrens.org/financialservices

The Health Consumer Alliance (HCA) offers free assistance over the phone or in person to help people who are struggling to get or maintain health coverage and resolve problems with their health plans. For more information visit healthconsumer.org

Availability of Translations

The Financial Assistance Policy, application and plain language summary are available in English and Spanish. Interpreters are available to address other language needs.

Alternate Formats of Notice

Alternate formats of this notice are available through valleychildrens.org/financialservices, including but not limited to: large print, audio and electronic formats.

Hospital Bill Complaint Program

If you believe you were wrongly denied financial assistance, you may file a complaint with the State of California's Hospital Bill Complaint Program. Go to HospitalBillComplaintProgram.hcai.ca.gov for more information and to file a complaint.