

HALIFAX HEALTH – PATIENT ASSISTANCE
303 N. Clyde Morris Blvd., Daytona Beach, FL 32114
(386) 425-4019

Appointment Line (386) 254-4000 ext. 3238

Patient Name
Adm. Date
Date of Birth
MR #

Dr.
Age

Visit #

FINANCIAL ASSISTANCE

You may qualify for financial assistance on medical services and treatment through Halifax Health – Patient Assistance

ELIGIBILITY:

- You have no insurance coverage.
- You must reside in the Halifax Hospital Medical Center Taxing District which includes Ormond Beach, Holly Hill, Daytona Beach, South Daytona, Port Orange, Ponce Inlet and Harbor Oaks for at least three months (90 days) prior to applying. You must provide three months of consecutive mail (P.O. Box not accepted).
- Your gross monthly income for the past 3 months must fall within financial criteria based on the Federal Poverty Guidelines.
- A complete financial analysis which may include credit bureau, government agency and other contacts demonstrates your inability to pay.
- You must apply for assistance, as deemed appropriate by Halifax Health – Patient Assistance (HHPA) staff, to DCF, social security or other entities, which offer services that may meet your needs.

SERVICES:

- HHPA provides financial assistance for services determined medically necessary. Services include hospital inpatient stays, outpatient services, and Same Day Surgery.
- Halifax Health has one primary healthcare centers. Halifax Health – Dunn Health Center, 1455 Dunn Avenue, Daytona Beach, (386) 239-6198.
- Blood work is done at Halifax Health and sent to an appropriate lab facility.
- Radiology procedures are provided at Halifax Health.
- Daytona Anesthesiology Associates will write off two-thirds of surgery charges. The adjusted amount after the HHPA write-off is the patient's responsibility. A payment plan can be set up with their office by calling (386) 255-1266.

NON-COVERED SERVICES:

- This program does NOT provide coverage for any specialist office visits, dental care, vision care, home health care, medical supplies, chiropractic care or mental health care (even if you are referred by the Halifax Health Emergency Departments or the Dunn Health Center.)
- HHPA does not cover services over 45 days old.

REVIEW:

- HHPA representatives will not review your application until ALL documents are received. All documents should be received within 15 days of the application date.
- HHPA representatives should be allowed 5 working days from the receipt of all required information to review/complete the application.
- If you are approved for HHPA, you will receive a HHPA identification card showing an eligibility plan along with the expiration date if ongoing treatment is needed. If this is a one-time assistance, you will not be contacted after approval, only if denied. If you are denied for HHPA, we will send a denial letter with explanation. Eligibility is determined by size of household and gross income for 3 months.
- All documentation is needed to renew a HHPA card.
- It is the patient's responsibility to inform HHPA of all hospital bills received within 15 days. Patients will be responsible to follow-up on any outside bills received.



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