



Children's
of Alabama

Financial Assistance Policy - Plain Language Summary

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Approvals

- Signature: Dana L. Blackman, Div Dir Revenue Mgt signed on 7/30/2026, 10:57:47 AM
 - Signature: Ann Goolsby, Coord Policy and Procedure signed on 8/3/2026, 12:57:25 PM
 - Signature: Dawn Walton, Chief Financial Officer signed on 8/3/2026, 8:21:13 AM
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Revision Insight

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Owner:	Cynthia Tompkins, Dir Revenue Cycle
Revision Official Date:	8/3/2026

Revision Note:

removing Children's on 3rd and adding Lakeshore and Patriot Park. Will have to update Spanish version as well.



Financial Assistance Policy - Plain Language Summary

I. Purpose

Children's of Alabama wants to give uninsured and underinsured patients discounted care that is medically necessary. An individual will not be charged more than amounts generally billed for emergency or other medically necessary care.

II. Policy

Eligible Patients – Patients who do not have insurance are automatically provided with a discount. This discount is shown on the billing statement you will receive from the Business Office. Additional discounts are available to those who apply and meet the eligibility requirements.

Eligible Services – Emergency and medically necessary healthcare services (inpatient and outpatient) provided by Children's of Alabama personnel at all locations including the Benjamin Russell campus, Children's South, Lakeshore, Patriot Park, and Park Place. Sub-Specialty Physicians and Surgeons, Anesthesiologists, Radiologists, and Psychiatrists are not employed by Children's of Alabama and are not covered by this policy – see policy for detailed list. This policy does not cover cosmetic, elective, experimental (including biologicals) non-urgent medical treatments or medical supplies/equipment. This policy is not intended to cover services not typically covered by most major health plans. (Additional Discounts may also be available for those who receive care in a Children's Primary Care location.)

III. Procedure

How to Apply – financial assistance applications may be obtained/completed/submitted as follows:

- Obtain an application in person from any hospital financial counselor, at any Children's of Alabama registration location, through the mail by calling the Business Office at **(205)638-5600** or **1-844-750-8950** or online at **www.childrensal.org**.
- Complete the application and attach copies of the supporting documentation as stated in the instructions.
- Mail or deliver the completed application and supporting documentation to:

By Mail:
PM):

In Person (accepted M-F 8:00 AM – 4:30

Children's of Alabama

Patient Relations Office – Main Street

Attention: Financial Counseling

Children's of Alabama

P. O. Box 36549

1600 7th Ave. South

Birmingham AL 35236-6549

Birmingham, AL 35223

Determination of Financial Assistance Eligibility – Additional discounts for patients **without** insurance is based on family income and family size as proven through the application and supporting documentation, based on the Federal Poverty Guidelines (published by the federal government annually) as set forth below:

Guidelines:	
If Family income and available assets as a % of FPL for family size is equal to:	Then the Additional Discount is:
0 - 200% of FPL	100% discount - Free Care
201% - 300% of FPL	50% discount
> 300% of FPL	No additional discount

Patients determined eligible for additional discounts will be notified and collection efforts will stop after notification.

Determination of Financial Assistance Eligibility – Additional discounts for patients **with** insurance is based on family income and family size as proven through the application and supporting documentation, based on the Federal Poverty Guidelines (published by the federal government annually) as set forth below:

Guidelines:		
If Family income and available assets as a % of FPL for family size is equal to:	And the amount owed by patient is equal to/greater than:	Then the Discount off Amount Owed is:
0-200 % of FPL	\$2500.00	50% Discount
201% - 300% of FPL	\$5000.00	30% Discount
> 300% of FPL	\$5000.00	No Discount - total amount owed limited to a maximum of 15% of annual family income.

When no payment is received for an account and the patient does not qualify for additional discounts, the account will be turned over to a collection agency. The collection agency may contact the patient/family for payment and may report the family to the credit bureaus. Extraordinary collection actions such as liens, lawsuits or garnishments are not used by Children's of Alabama for the non-payment of accounts.

For help or questions, please call the Financial Counseling department at (205) 638- 2722. For a complete copy of the Financial Assistance policy, go to **www.childrensal.org**.

IV. Reference/Regulations

Charity Care Policy fo Insured Patients with High Deductibles, Co-pays or Limited Coverage

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Attachments: (REFERENCED BY THIS DOCUMENT)			
Other Documents: (WHICH REFERENCE THIS DOCUMENT)		Charity Care Policy for Insured Patients with High Deductibles, Co-pays or Limited Coverage Charity Care Policy for Uninsured Patients (Discounted Care or Charity Care)	

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