Financial Assistance



Financial Services

Public Aid Eligibility

Methodist Health System financial assistance policy

Methodist Health System has a Financial Assistance Policy that provides free or reduced-cost hospital care for patients who have received non-elective care, do not meet the qualifications for Medicaid, and whose income is less than 100 percent (in most cases) of the federal poverty level.

In order to qualify for this discounted care, state law requires patients complete a Financial Assistance Application Form and provide documents

to support your income. These documents will be verified by Methodist Health System prior to determining eligibility.

Plain Language Summary of Financial Assistance Policy:

- English
- Spanish
- Chinese (Traditional)
- Vietnamese
- Korean
- Arabic

Financial Assistance Policy

- English
- Spanish
- Chinese (Traditional)
- Vietnamese
- Korean
- Arabic
- Urdu
- Tagalog
- French
- Hindi
- Persian (Farsi)
- German
- Gujarati
- Russian
- Japanese
- Laotian

Financial Assistance Application

- English
- Spanish
- Chinese (Traditional)
- Vietnamese
- Korean

- Arabic

Billing and Collection Policy

- English
- Spanish
- Chinese (Traditional)
- Vietnamese
- Korean
- Arabic
- Urdu
- Tagalog
- French
- Hindi
- Persian (Farsi)
- German
- Gujarati
- Russian
- Japanese
- Laotian

Discount to the Uninsured Policy

- English
- Spanish
- Chinese (Traditional)
- Vietnamese
- Korean
- Arabic
- Urdu
- Tagalog
- French
- Hindi
- Persian (Farsi)
- German
- Gujarati
- Russian
- Japanese
- Laotian

Please submit all requested documents to:
Methodist Health System
attn: CC 90840 CBO/CS
P.O. Box 655999
Dallas, Texas 75265-9969

Call (214) 947-6300 for additional questions.

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1441 N Beckley Ave
Dallas, TX 75203

(214) 947-8181

Contact Us

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