



**JFK Health System Compassionate Care Program Request for Participation
Financial Assistance Program**

Under the Compassionate Care Program, the patient’s financial responsibility is 15% above Medicare established reimbursement rates for inpatient, outpatient, or professional services.

The Compassionate Care Program applies to patients who do not have government, commercial, or private payor plans, or to patients who have payor plans but choose not to use them.

- If the patient chooses not to use his/her payor plan and accepts Compassionate Care, he/she cannot ask at a later date to have the services billed to the payor plan for the encounter dates already rendered.

The Compassionate Care Program does not apply for copayment, deductible, coinsurance or other patient responsibility after government, commercial, or private payor plans have paid. Nor does it apply to Workman’s Compensation, Motor Vehicle Accidents, or other 3rd Party Liability.

Patients may be eligible for NJ Hospital Care Payment Assistance Program and may apply under a separate application found on this site, or may call 732-321-7534. If the patient is denied for said Charity Care, or receives only partial Charity Care, he/she may also request Compassionate Care.

I request participation in the Compassionate Care Program for these services:

- | | |
|--|--|
| <input type="radio"/> Future services | <input type="radio"/> Services already rendered |
| <input type="radio"/> Facility Services | <input type="radio"/> Physician Services |
| <input type="radio"/> JFK Medical Center | <input type="radio"/> JFK Johnson Rehabilitation |

Brief description of service(s) or account number(s) if known: _____

Name: _____ D.O.B.: _____

Phone: _____ Cell Home Work

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Best time to call: _____

Or contact the JFK Clinical Data Management at 732-321-7000 - Ext. 66521, or Ext. 62434, or Ext. 66280.



JFK Office Complex - Business Office
80 James Street, Edison, NJ 08820
Ph: 732-321-7000

Exceptional Care. Exceptional People.