

## Medical Financial Assistance

Age Requirements

No Age Requirement

Available 24/7

No

Other Eligibility Criteria

Under-insured, uninsured or needs financial assistance

Intake Process

Visit the website for information; call to schedule an appointment

Provider Refer

Yes

Report Problems

Call the Agency

Self Refer

Yes

Riverside Walter Reed Hospital

<http://www.riversideonline.com/rwrh>

<https://www.facebook.com/riversidehealth>

<https://twitter.com/riverside>

Main

(757) 989-8830

Toll-Free

(800) 675-6368

P.O. Box 6008

23606 VA

United States

Fee Structure

No Fee

Languages Spoken

English

Riverside uses the Federal Poverty Income Guidelines to determine eligibility for financial assistance. Currently, a patient with income of 200% or less of the Federal

Poverty Guidelines will be considered. Additional criteria must also be met.

Uninsured patients will be evaluated for the Financial Assistance Program through a paper application with required documentation and/or through presumptive Financial Assistance using third party credit scoring software vendor. Liquid Assets are taken into consideration. [Financial Application](#) - English (PDF)

You may be eligible for one of our Riverside Health System financial programs. In order to benefit from these Assistance programs, you need to provide the information required to determine your eligibility for this assistance in a timely manner.

For more information on the Financial Assistance Program, please call (757) 968-5901

You may be eligible for Riverside's Financial Assistance Program for uninsured patients. You may also be eligible for public or private assistance programs. Riverside's Financial Counselors will help you apply for those programs. The Financial Assistance Policy is for patients who are not able to pay for the emergency and medically necessary services they received from Riverside Health System. This Financial Assistance Policy does not cover elective medical procedures.

Help with your bill can be provided at any time during a visit or during the billing process. The amount you owe will be determined by reviewing your income and resources. Financial assistance can be with part or all of your bill. You will provide paperwork about income, assets and other paperwork to see if you qualify for financial assistance.

For more information on the Financial Assistance Program, call 757-968-5901.

You can get free copies of a financial application and the financial assistance policy in English and Spanish language Contact Customer Service Center at 1-800-621-7677

Service Area(s)  
Gloucester County