FINANCIAL ASSISTANCE VERIFICATION CHECKLIST

If you are under age 21, age 65 or older, pregnant, blind, disabled or a parent or close relative living with and acting as a parent for a child under the age of 18, we will require a Medicaid Determination to review your accounts for Financial Assistance.

☐ Medicaid Determination

If you are uninsured we will require that you enroll in the Health Insurance Marketplace before we are able to review your accounts for Financial Assistance. If you have enrolled and have documentation or have received an exemption from enrollment, please provide documentation with your application. If you are not able to obtain this documentation, we will require you fill out the Health Insurance Marketplace Attestation Document.

☐ Marketplace Attestation

**Income Verifications**

☐ Employment Income
  (Past 30 days consecutive check stubs showing gross amount)

☐ Self-employed, rental or farm income
  (Previous year tax documents (1040 form with Schedule C, E or F)

☐ Social Security Income
  (Social Security Benefit Letter)

☐ Unemployment Income
  (Unemployment Benefit Letter)

☐ Child Support Income
  (Court document showing awarded amount)

☐ Pension or Monthly Annuity Payments
  (Award letter)

☐ Seasonal Employment Income
  (Previous year’s W2 form.)

☐ No Income
  (Letter of support completed by person providing you with food and/or shelter)

**Asset Verifications**

☐ Savings/Checking Account
  (Past 60 days bank statements for each account)

☐ CDs, Money Markets
  (Past 30 days statement showing current balances in each investment)

☐ Any Investments you receive monthly income from
  (Past 30 days bank statement showing direct deposits or award letter)