



Copley Hospital

Get help paying for health care.

We have a financial assistance program to help you afford the care you need.

What is the financial assistance program?

We give free and low-cost care to patients at Copley Hospital. It is for people who are uninsured and people who have insurance that need help with the cost of the care provided. The care must be medically necessary for your health.

Who can get financial assistance?

To qualify:

- **You must be a Vermont resident.** This includes students, people who are employed in Vermont, undocumented immigrants, and people who live in Vermont but do not have housing, including homeless.
- **Your income must be less than the limit.** There are different income limits for free and low-cost care. See the charts.
- **Your asset resources must be less than the limit.** These are cash, checking and savings accounts, etc. Your primary home, car, and retirement accounts are not included.

Income limits

Find your household size and income on the charts below. For most people, your household size will be the people listed on your taxes. If you make too much money for free care, you might qualify for low-cost care.

Free care

You could get **free care** (pay \$0) if your household income is below **300% of the Federal Poverty Level**. In 2026, your household income would need to be below this amount for your household size:

Household Size	Household Income
1 person	\$47,880
2 people	\$64,920
3 people	\$81,960
4 people	\$99,000
5 people	\$116,040
6 people	\$133,080
7 people	\$150,120
8 people	\$167,160

Low-cost care

You could get a **50% discount** (or more) if your household income and assets resources are below **400% of the Federal Poverty Level**. In 2026, your household income would need to be below this amount for your household size:

Household Size	Household Income
1 person	\$63,840
2 people	\$86,560
3 people	\$109,280
4 people	\$132,000
5 people	\$154,720
6 people	\$177,440
7 people	\$200,160
8 people	\$222,880

****More information on next page****

Catastrophic care

Ask us about catastrophic care if you owe the hospital a lot of money, but your income is too high to qualify for free or low-cost care. It is for people with an income that is less than 600% of the Federal Poverty Level and who owe more than 20% of their yearly income to the hospital for the cost of services provided. We can help you figure out if this could help.

How to apply

You can apply before or after you get services. If you apply after you get services, you must do this within 240 days of getting the first bill.

Follow these steps:

1. Get a free application.

- In-person: Reception, Registration and Patient Financial Services.
- Online: www.copleyvt.org
- By mail: Call 802-888-8338 and ask us to mail you a copy for free.

2. Fill out the application.

3. Give or send us your finished application.

- Drop it off at:

*53 Spring Street, Building C
Morrisville, VT*

Monday thru Friday 8:00AM – 4:30PM

- or Mail it to:

*Copley Hospital
Attn: Patient Financial Services
528 Washington Highway
Morrisville, VT 05661-8973*

What happens next?

You will get a letter from us in the next 30 days. It will say if you are approved, denied, or need to send more information. If it has been more than 30 days and you did not get a letter, please call us at 802-888-8338.

How to get help

You can get free help with the application.

- **Visit our financial counseling office:**

*53 Spring Street, Building C
Morrisville, VT*

Monday thru Friday 8:00AM – 4:30PM

- **Call:** 802-888-8338
- **Email:** agriggs@chsi.org

Free language support

We give free help to people who have communication or language needs. We can give interpretation and translation support. We can also help those who need this information in different ways. Tell us if you need language support.

More information

Who accepts financial assistance

Everyone who works for the hospital accepts financial assistance. There are a few people and groups that can give people services at the hospital who do not accept it. You can find the list here: www.copleyvt.org. Or ask us about your doctor.

Read the full policy

This is a plain language summary of our financial assistance policy. Read the longer version with more details here: www.copleyvt.org. Or ask us for a free copy.

Non-discrimination

We do not discriminate based on race, color, sex, sexual orientation, gender identity, marital status, religion, ancestry, national origin, citizenship, immigration status, primary language, disability, medical condition, or genetic information.