

## Patient Financial Profile

CONFIDENTIAL

### Patient's Name \*

First Name      Last Name

### Patient Date of Birth



Month    Day    Year

### Phone Number

Area Code    Phone Number

### Date of Transplant



Month    Day    Year

### Date of First Dialysis Treatment



Month    Day    Year

### Insurance Information

- Private Insurance
- AHCCCS.
- Medicare
- VA Coverage
- No Coverage

## Insurance Carrier Name

## Insurance Expiration Date



Month   Day   Year

## Treatment Facility

## Address

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

## How long at current address?

### Home is:

Rented

Owned

**Name and address of Landlord (rented) or Leinholder (own)**

**Marital Status**

**Number of Dependents**

**Household is less than 400% Federal Poverty Level (see chart below)**

Yes

No

Household size (number living there) / 400% Federal Poverty Guidelines

1	2	3	4	5	6	7	8
\$47,520	\$64,080	\$80,640	\$97,200	\$113,760	\$130,320	\$146,920	\$163,560

**Demographic information is often required to obtain grant funding for patient programs.**

This is optional, but greatly appreciated.

**Patient Ethnicity (Please choose one)**

**Is patient of Hispanic descent? (Please choose one)**

**Patient is an enrolled member of the following tribal community, village, reservation or nation:**

Please select all that apply

**Date**



Month Day Year

**Unit Representative Name**

First Name Last Name

**Position**

**Date**



Month Day Year

## Transportation assistance application form

### Transportation Assistance Requested

### Date of Request



Month   Day   Year

### Patient Name

First Name   Last Name

### Current Patient Financial Profile:

On File (Must be dated within 6 months of request)

New, being submitted with this request

### Social Worker Name

### Description of Financial Need:

**Description of Travel Need:**

**Transportation Provider**

**Miles**

**Trip Date**



Month   Day   Year

**Trip Cost**

**Trip Description**

**Trip Origin**

**Trip Destination**

