



When applying for Financial Assistance for services rendered you are affirming that all statements made on the application are true and correct.

Receipt of this application is not a guarantee that an extended payment plan or Financial Assistance will be approved. During the application review process, payments must continue on a regular monthly basis to avoid the possibility of referral to collections.

Financial Assistance Documentation Requirements

To complete Phoenix Children's review of your Financial Assistance application, please submit the following documents along with a signed Financial Evaluation form:

Required Documentation

- Fully completed, signed, and dated Financial Evaluation
- Copy of your AHCCCS and/or Marketplace application submission, including the determination status

Proof of Income

Please provide **two (2) of the following three (3) documents**:

1. Two most recent pay stubs for all responsible parties
2. Two most recent monthly bank statements for all accounts
3. Most recently filed federal tax return (*Annual income is determined by annualizing year-to-date family income.*)

Proof of Arizona Residency

Please provide **one (1)** of the following: **Arizona Driver's License; Rental Agreement or Mortgage Statement; Utility Bill.**

Additional Income Verification

Please provide copies of any applicable income sources: **Social Security benefits; Disability benefits; Unemployment benefits (checks or award letter).**

If Unemployed

Please indicate the reason for unemployment and provide the applicable information: **Layoff Quit Retired**

Terminated (include date of termination) _____

Disabled (include date disability began) _____

Please also provide the name of your last employer. _____

Arizona Locations for walk-in:

Phoenix Children's Main Campus: 1919 E. Thomas Road (Admitting Office) Phoenix, AZ 85016

Mercy Gilbert Medical Center: 3370 S Mercy Rd, Medical Office Building 2. Gilbert, AZ 85297

Avondale Medical Center: 1665 North Avondale Blvd. Avondale, AZ 85392

Arrowhead Medical Center: 19007 North 67th Ave. Glendale, AZ 85308

Or option to mail completed Financial Evaluation and required documents to:

Phoenix Children's

PO Box 743421

Los Angeles, CA 90074-3421

For questions regarding the Financial Assistance Application process, please call:

Customer Service: 602-933-8700 or Financial Counseling at: 602-933-2000.

Business Hours: Monday – Friday/8:00am – 5:00pm MST

Sincerely,

Phoenix Children's