I. Purpose

Inova’s mission is to provide world-class healthcare – everytime, every touch – to each person in every community we have the privilege to serve. Pursuant to that mission and as a tax-exempt health care organization, Inova provides emergency and other medically necessary health care for individuals regardless of their ability to pay.

II. Policy

Inova has established this Financial Assistance Policy (FAP) in order to manage its resources responsibly and to allow Inova to provide the appropriate level of assistance to the greatest number of persons in need. This policy also is designed to comply fully with any binding agreements with local governments and with all applicable state and federal laws and regulations, including Section 501(r) of the Internal Revenue Code.

Under this policy, Financial Assistance is provided for eligible individuals who receive emergency and other medically necessary services provided by each of Inova’s hospital facilities and by other Covered Entities and Covered Providers.

The policy includes:

- Definitions of various terms used throughout this policy;
- A description of:
  - Financial Assistance available for services covered by this policy,
  - Eligibility criteria that an individual must satisfy to receive each type/level of Financial Assistance,
  - How individuals may apply for Financial Assistance,
  - Information that Inova may use to establish eligibility that is obtained from sources other than the individuals seeking Financial Assistance,
  - Actions that Inova may take in the event of nonpayment,
o How Inova will widely publicize the policy within the communities served by each hospital facility and by other Covered Entities,

o How Inova determines Amounts Generally Billed (AGB), and

o Basis for calculating amounts charged to patients eligible for Financial Assistance under this policy.

There are three Appendices to this policy:

- Appendix A provides applicable Federal Poverty Guidelines
- Appendix B specifies which Inova facilities and providers are and are not covered by this policy
- Appendix C specifies the comprehensive list of acceptable documentation for income and residency.

No Inova hospitals, entities, or providers covered by this policy will charge individual’s eligible for Financial Assistance more than Amounts Generally Billed.

Governance

This policy has been approved by authorized bodies for the facilities and entities to which it applies.

III. Definitions

For the purpose of this policy, the terms below are defined as follows:

- **Amounts Generally Billed (AGB):** Under 501(r), a hospital may determine AGB by multiplying the hospital’s gross charges for care by one or more percentages of gross charges (AGB percentages). A hospital facility must calculate its AGB percentage(s) at least annually by dividing the sum of all of its claims for emergency and other medically necessary care by the sum of the gross charges for those claims. For more information on Inova’s computation of AGB, see page 10 of this policy. For more information regarding the AGB and/or computation (available free of charge) please contact Inova’s Financial Assistance Department at 571-423-5880.

- **Covered Entities:** The Inova entities that provide emergency and/or other medically necessary care and to which this Financial Assistance Policy applies, include:
  
  o Inova Hospital Facilities:
    
    - Inova Alexandria Hospital
    - Inova Fair Oaks Hospital
    - Inova Fairfax Medical Campus
    - Inova Loudoun Hospital
    - Inova Mount Vernon Hospital
  
  o Other Inova Ambulatory Facilities:
    
    - Inova Cares Clinic for Children
    - Inova Cares Clinic for Women
    - Inova Cares Clinic for Families
    - Inova Emergency Care Centers
Selected Inova Medical Group Physician Practices (see Appendix B)

- **Covered Providers**: The subset of Inova-affiliated physicians and other providers to which this Financial Assistance Policy applies. See Appendix B for a full list of Covered Entities and Covered Providers.

- **Eligible Services**: Services provided by Inova's Covered Entities and Covered Providers which are eligible for Financial Assistance, including: (1) emergency medical services provided in an emergency room setting; (2) services provided in response to life-threatening circumstances in a non-emergency room setting; and (3) other Medically Necessary services.

- **Emergency Medical Conditions**: Medicare participating hospitals must meet the Emergency Medical Treatment and Labor Act (EMTALA) requirements codified in section 1867 of the Social Security Act (42 U.S.C. 1395dd). In no event will emergency medical care be denied to any patient presenting for such care and nothing in this policy shall be construed to permit the denial of such care regardless of the patient’s/guarantor’s Financial Assistance status, insured status, ability to pay, current or past collection status, or delinquency of any debt.

- **Family**: According to Internal Revenue Service rules, if the patient claims someone as a dependent on their income tax return, they are considered family members for purposes of the provision of Financial Assistance. Inova follows the same guidance for its determination. Income verifications will be requested for significant others if they are listed on the application as support.

- **Family Income**: Family Income is determined as follows:
  - Determined on a before-tax basis;
  - Includes earnings, unemployment compensation, workers' compensation, Social Security, Supplemental Security Income, public assistance, veterans' payments, survivor benefits, pension or retirement income, interest, dividends, rents, royalties, income from estates, trusts, educational assistance, alimony, child support, assistance from outside the household, and other miscellaneous sources;
  - Excludes capital losses; and
  - Following IRS guidelines, if a family member has claimed that patient on their income tax return, they are considered family members and such family members' income should be included.

A comprehensive list of acceptable documentation is available in Appendix C.

- **FAP-Eligible Individual**: An individual that Inova has determined is eligible to receive Financial Assistance pursuant to this Financial Assistance Policy.

- **Federal Poverty Guidelines (FPG)**: Poverty guidelines updated periodically in the Federal Register by the U.S. Department of Health and Human Services (see Appendix A).

- **Financial Assistance**: Financial Assistance includes free or discounted health services provided to persons who meet Inova’s criteria for Financial Assistance and are unable to pay for all or a
portion of services provided. Financial Assistance does not include: bad debt or uncollectible charges that Inova recorded as revenue but subsequently expensed due to a patient’s failure to pay; the difference between the cost of care provided under Medicaid or other means-tested government programs or under Medicare and the revenue derived therefrom; self-pay or prompt pay discounts; or contractual adjustments with any third-party payers.

- **Gross Charges:** The total charges at the organization’s full established rates for the provision of patient care services before deductions from revenue are applied.

- **Income Documentation:** Acceptable documentation of Family Income must include at least two (2) of the following documents:
  - Copy of the most recent tax return;
  - Copies of the 2 most recent pay stubs;
  - One other form of third party income verification deemed acceptable to Inova, such as a home lease or purchase application, automobile lease or loan application, or other application requiring income verification.

A comprehensive list of acceptable documentation is available in Appendix C.

- **Medically Necessary:** Services for a condition which, if not promptly treated, would lead to an adverse change in the health status of a patient. Bariatric services, cosmetic procedures, and certain other services are not covered by this Financial Assistance Policy.

- **Inova Service Area:** The geographic area served by Inova – for the purposes of this policy coverage will include the state of Virginia.

- **Uninsured:** The patient has no level of insurance or third party assistance to assist with meeting his/her payment obligations.

- **Underinsured:** The patient has some level of insurance or third-party assistance but still has out-of-pocket expenses that exceed his/her ability to pay.

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### IV. Eligibility

#### Eligibility Criteria and Financial Assistance Available

Inova provides Financial Assistance for individuals based on an assessment of their household income, available assets, and eligibility for government sponsored or government subsidized health insurance programs. Financial Assistance to the uninsured or underinsured for Eligible Services provided by an Inova hospital facility, Covered Entity, or Covered Provider is determined based on the criteria below.

1. **Financial Assistance for Emergency Medical Conditions or Non-Emergent, Medically Necessary Services.**

Inova’s Financial Assistance Program is intended to be a program of last resort for those who are unable to pay for emergency and medically necessary care. As such, Financial Assistance applicants are expected
to comply with the screening and application processes of any local, state, or federal programs that would cover the cost of the same medical care, including traveler health programs or any organizational programs, such as those administered by foreign governments or international organizations/corporations for affiliated persons.

A. Residency Requirement: Financial Assistance for Emergency Medical Conditions or Non-Emergent, Medically Necessary Services is available for individuals who live in Inova’s Service Area and have established residency for ninety (90) days or longer prior to the date eligible services are first rendered. Residency requirements will not apply to Inova Cares Clinics for Women, Children, and Families.

Individuals may prove residency within the Inova Service Area by showing two (2) items from the list below that include a current address:

- Virginia Driver’s License or State-Issued ID card
- Monthly bank statement. Must be issued by a bank 90 days or longer prior to services;
- Current automobile or life insurance bill;
- U.S. Internal Revenue Service (IRS) tax reporting W-2 form or 1099 form not more than 18 months old;
- U.S. or Virginia income tax return from the previous year;
- Utility bill issued to applicant. Examples include gas, electric, sewer, water, cable or phone bill;
- Lease agreement;
- Virginia Voter Registration Card mailed to applicant by local registrar;
- Receipt for personal property taxes or real estate taxes paid within the last year to the Commonwealth of Virginia or a Virginia locality;
- Virginia Department of Education Certificate of Enrollment form; and/or
- Certified copy of school records/transcripts issued by a school accredited by a U.S. state jurisdiction or territory.
- Notarized letter of residency

A comprehensive list of acceptable documentation is available in Appendix C.

B. Three categories of Financial Assistance are available for individuals who satisfy the Residency Requirements outlined above and the income criteria below.

1. **Uninsured Individuals**: A 100% Financial Assistance discount (free care) is available for uninsured patients with Family Incomes at or below 400% of the current Federal Poverty Guidelines (FPG).

2. **Underinsured Individuals**: A 100% Financial Assistance discount (free care) is also available for insured individuals with Family Incomes at or below 400% of the current FPG who have partial coverage (e.g., underinsured individuals who after receiving treatment are left with liabilities they are unable to pay), who otherwise meet eligibility criteria described in this policy, and whose insurer allows Inova to grant a Financial Assistance discount on their balances after insurance. Inova is unable to waive deductibles, coinsurance and/or other patient obligations for individuals that hold insurance plans under which Inova is not a participating provider.
3. **Catastrophic Financial Assistance:** Catastrophic Financial Assistance is available for patients who do not qualify for free care based on the criteria above, who, due to the nature and extent of services provided, have significant care-related financial obligations in relation to household income and other potentially available resources. In such circumstances, the patient responsibility will be limited to the lesser of 30% of Family Income or the Amounts Generally Billed.

2. **Pre-negotiated rates.**
Patients receiving pre-negotiated discounts (package pricing) for services will not be eligible for Financial Assistance.

3. **Non-discrimination.**
The granting of Financial Assistance is based on an individualized determination of financial need, and does not take into account age, gender, gender identity, race, national origin, social or immigrant status, sexual orientation, or religious affiliation. Inova also provides, without discrimination, care for emergency medical conditions to individuals regardless of whether they are eligible for Financial Assistance.

4. **Requirement to Apply for Government Sponsored or Subsidized Insurance or Private Insurance.**
The Inova Financial Assistance Program is not an insurance policy. Inova requires uninsured individuals to apply for government sponsored (e.g., Medicaid) or government subsidized health insurance or private insurance if Inova believes that these individuals may be eligible for those programs/plans, including traveler health programs or any organizational programs, such as those administered by foreign governments or international organizations/corporations for affiliated persons. Individuals with the ability to purchase health insurance either through a government sponsored plan or an employer based plan will be required to do so, as a means of assuring their access to health care services, for their overall personal health, and for the protection of their assets.

5. **Presumptive Financial Assistance.**
   A. Inova recognizes that not every patient, or patient’s guarantor, is able to complete the financial assistance application or provide the required documentation. In such cases, Inova may deem patients presumptively eligible for Financial Assistance by utilizing a third-party to review a patient’s, or the patient’s Guarantor’s, information to assess eligibility for financial assistance.
   B. Once accounts are deemed eligible through the Presumptive Financial Care process, the patient obligation amount in the account will receive a 100% financial assistance discount.
   C. Inova may deem individuals presumptively eligible if they demonstrate the following conditions or eligibility in the following means-tested programs:
      1. Homelessness;
      2. Deceased with no estate;
      3. Supplemental Nutrition Assistance Program (SNAP);
      4. Patients qualifying for Emergency Medicaid will be eligible for assistance associated with emergency or medically necessary services not covered by the Medicaid program;
      5. Patients qualifying for Local County Indigent Programs will be eligible for assistance associated with emergency or medically necessary services not covered by such program.
6. Exceptions to this Policy
The Vice President of Revenue Cycle, Vice President of Population Health and Vice Presidents of Finance of each Inova facility have the authority to grant financial assistance on a case-by-case basis to individuals who otherwise would not qualify for financial assistance under this Policy.

7. Eligibility if Individuals are Denied Government Coverage.
Financial Assistance is available to low-income patients who applied for government sponsored or government subsidized health insurance but subsequently were denied coverage due to excess income or resources, and/or because they have not met the emergency/disability requirements for those insurance programs.

8. Patient right to appeal.
If a patient disagrees with Inova’s Financial Assistance eligibility determination, the patient may appeal in writing within 45 days of the determination. Inova’s Financial Aid Office will review the appeal and will communicate a final decision within 60 days.

V. Application Procedure

How to Apply for Financial Assistance


The Application requires Income Documentation as well as information about certain assets (retirement account balances, bank account balances, whether applicants own or rent their place of residence). Individuals must complete the Application and return the completed form along with required documentation to:

Inova Patient Financial Services
8095 Innovation Park Drive, Suite 501
Fairfax, VA 22031

Individuals can obtain assistance with the application process by contacting the Financial Assistance Department at 571-423-5880.

Applications for Financial Assistance should be submitted as soon as possible, and will be accepted for up to 240 days from the date of the first post-services billing statement. If a complete Application for Financial Assistance is submitted prior to 240 days from the first statement, Inova will make a determination as to FAP-eligibility and will notify the applicant in writing regarding the assistance for which the individual is eligible. If an incomplete Application for Financial Assistance is submitted, Inova will provide a written notice that describes the information or documentation needed to complete the Application.

Financial Assistance determinations are valid until the last day of the sixth (6th) month following the date of the first eligible service. Patients will not be required to reapply for Financial Assistance during
that six-month period; however, patients returning for inpatient services may be asked to reapply for
government sponsored or government subsidized health insurance for which they may be eligible.

The need for Financial Assistance will be re-evaluated at each subsequent time that Eligible
Services are provided if the Application for Financial Assistance on file is invalid.

Inova's values of human dignity and stewardship shall be reflected in the application process, financial
need determination and granting of Financial Assistance. Requests for Financial Assistance shall be
processed promptly and Inova shall make reasonable efforts to notify the patient or applicant
regarding eligibility determinations in writing within 30 days of receipt of a completed application.

For Financial Assistance to be granted by Inova, individuals must cooperate by providing requested
information on a timely basis, by applying for government sponsored or government subsidized
health insurance or any other insurance programs for which they may be eligible, and by paying any
amounts due as required by payment plans established between the patient and Inova.

Use of Information from Sources Other than Individuals Seeking Financial Assistance

In determining eligibility, Inova may use information from sources other than the individual
seeking Financial Assistance. This includes data from systems that:

- Help Inova identify individuals who may need Financial Assistance and who thus should be
contacted to receive an Application for assistance;
- Help Inova validate the accuracy of information submitted by individuals in their
applications for Financial Assistance;
- Help Inova identify whether certain patients believed to be uninsured already have
established eligibility for Medicaid or other third-party coverage; and/or
- Identify individuals as patients of a safety-net organization (e.g., a Federally Qualified Health
Center) that already has income or other documentation that Inova may accept for purposes of
determining eligibility for Financial Assistance.

Processes in the Event of Nonpayment

Patients who have not applied for Financial Assistance under this policy are subject to Inova's normal
billing and collections processes.

All patient responsibility portions of Inova's accounts will process through Inova's billing and collection
systems for effective collections within federal guidelines. Patient responsibility portions will be
processed through pre-billing, statement, and follow-up in automated and systematic steps. All
collections actions will be in compliance with the Fair Debt Collection Practices Act and ACA
International's Code of Ethics and Professional Responsibility.

Patients will receive statements for 120 days. After 120 days, with no contact from the patient and
without the establishment of acceptable payment terms, accounts will be transferred to a professional
collection agency. If continued non-payment occurs beyond a reasonable period of time, Inova may take
additional actions on the account.
If a patient wishes to make payment arrangements and does not have resources to pay the account in full, the patient should make Inova aware of their situation and Inova will offer payment plans.

No Inova entity or third-party collections agent will impose extraordinary collections actions ("ECAs") such as legal actions or adverse credit reporting against any patient, without first making reasonable efforts to determine whether that patient is eligible for Financial Assistance under this policy. These reasonable efforts include:

- Assuring that no ECAs are imposed for at least 120 days from the date of the first billing statement.
- Providing a 30-day written notice that includes information about Inova's Financial Assistance Policy and about any intended ECAs to be imposed in the event of nonpayment.
- Providing oral notification of any intended ECAs to be imposed in the event of nonpayment.
- If a patient is determined to be eligible for Financial Assistance after payment is received or after an ECA has been imposed, the account will be adjusted and the collections action will be reversed.
- The Vice President of Revenue Cycle Operations or his/her designee is responsible for determining whether Inova has made reasonable efforts to determine whether an individual is FAP-eligible and whether one or more ECAs may be imposed.

VI. Communications Related to Policy

How Inova Will Widely Publicize this Policy

Inova, together with each Inova entity, will widely publicize this Financial Assistance Policy, through the following means.

- Inova will make a link to this Financial Assistance Policy (FAP) in its entirety, the Application for Financial Assistance, and a Plain Language Summary of the FAP available on web sites for each hospital facility and Covered Entity;
- Paper copies of this policy, the Application for Financial Assistance, and/or the Plain Language Summary will be made available without charge upon request, in public locations, and by mail;
- A Plain Language Summary of the FAP will be offered as part of the intake or discharge process, so that all patients including those who are uninsured, underinsured or classified as self-pay will be informed of the policy;
- The FAP, the Application for Financial Assistance, and a Plain Language Summary of the FAP will be translated for significant populations (the lesser of 1,000 individuals or 5 percent of the community served by each Inova hospital facility) that have limited English proficiency;
- Billing statements and Conditions of Admission forms will include a conspicuous written notice regarding the FAP (including the phone number of an Inova department that can provide information about Financial Assistance);
- Verbal and written explanations of the policy also will be made to those persons who give an indication of an inability to pay for services;
- Inova will assure that the Financial Assistance Policy is described in conspicuous public displays in public locations in each Inova hospital facility and Covered Entity, including the emergency room and admissions and registration areas;
- Inova will provide copies of the Plain Language Summary to community based organizations (e.g., Federally Qualified Health Centers and other safety net clinics) who serve individuals most likely to require financial assistance; and
- Information about this Financial Assistance Policy routinely will be included in marketing and community benefit communications to the communities served by Inova.

## VII. Additional Regulatory Information

### Amounts Generally Billed (AGB)

Inova Health System assures that individuals eligible for Financial Assistance are billed no more than the Amounts Generally Billed to insured individuals. Inova Health System calculates the minimum discounts offered under this Financial Assistance Policy using the “look back” method described in Internal Revenue Code, section 501(r). Under that method, the minimum discount that must be provided for FAP-eligible individuals is calculated for each Inova Health System hospital facility and Covered Entity as follows:

- Inova Health System determines the amount generally billed (AGB) using the look-back method.
- The AGB is calculated for each Inova hospital facility and the most generous AGB discount calculated is then applied system-wide.
- The AGB is calculated using all claims allowed by both private pay insurers (including Medicare HMO) and Medicare (traditional and fee-for-service) for both inpatient and outpatient services. Payers excluded from the calculation include Medicaid, Medicaid Pending, charity and self-pay.
- The result of the AGB calculation provides the maximum percentage of gross charges that a FAP-eligible individual will be asked to pay (with the inverse representing the minimum financial assistance discount to be offered).
- The AGB is computed April 1 of each year for the prior 12-month fiscal year ending December 31. Any changes to the AGB calculation that result from the updated computation are to be implemented within 120 days of that date.

For more information regarding the AGB and computation (available free of charge) please contact Inova’s Financial Assistance Department at 571-423-5880.

### Regulatory Requirements

In implementing this Policy, all Inova hospital facilities, Covered Entities, and Covered Providers shall comply with all other federal, state, and local laws, rules, binding agreements, and regulations that apply to activities conducted pursuant to this Policy.
Appendix A

Federal Poverty Guidelines, 2020

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Updated February 2020
Appendix B

Covered Entities and Covered Provider List

The following facilities are covered by the Inova Financial Assistance Policy:

- **Inova Hospital Facilities:**
  - Inova Alexandria Hospital
  - Inova Fair Oaks Hospital
  - Inova Fairfax Hospital
  - Inova Loudoun Hospital
  - Inova Mount Vernon Hospital

- **Other Inova Ambulatory Facilities:**
  - Inova Cares Clinic for Children
  - Inova Cares Clinic for Women
  - Inova Cares Clinic for Families
  - Inova Emergency Care Centers

The following physician practices are covered by the Inova Financial Assistance Policy:

- Inova Arrhythmia
- Inova Cardiology
- Inova Cardiac & Thoracic Surgery
- Inova Center for Wellness & Metabolic Health
- Inova Gastroenterology
- Inova Hematology Oncology
- Inova Melanoma & Skin Cancer
- Inova Neurology
- Inova Neurosurgery
- Inova Podiatric Surgery
- Inova Rheumatology
- Inova Surgical Services
- Inova Urology
- Inova Vascular and Vein

The following practices are **NOT** covered by the Inova Financial Assistance Policy:

- Inova Bariatric Surgery
- Inova Breast Surgery
- Inova Dermatology
- Inova Medical Group Primary Care
- Inova Obstetrics & Gynecology
- Inova Orthopedics
- Inova Sports Medicine
- Inova Weight Loss Services
- Inova Urgent Care Centers

Updated 5/20
The following providers are **NOT** covered by the Inova Financial Assistance Policy:

- Abbott, Katherine A., MD, Crestwood Pediatric Associates PC
- Abdulsalam, Farah Z., MD, Kaiser Permanente
- Abedin, Tareq, MD, Ashburn Sterling Internal Medicine and Pediatrics
- Abidin, Michael R., MD, Metropolitan ENT and Facial Plastic Surgery
- Ables, Waylan, MD, Springfield Medical Center - Kaiser Permanente
- Abou Nahlah, Esam, DDS, Dental Group of Tysons
- Abousy, Khalid A., MD, Carient Heart and Vascular PC
- Abraham, Sheena, MD, Virginia Center for Medicine
- Adawi, Adnan S., MD, Asthma and Pulmonary Specialists of Northern Virginia Ltd
- Addis, Hampton M., MD, Graduate Medical Education Office
- Adler, Oscar, MD, Loudoun Medical Group
- Afram, David, MD, Capital Women's Care
- Aguiar, George, MD, OrthoVirginia Inc
- Ahalt, Ryan G, DPM, Kaiser Permanente Tysons Corner Medical Center
- Ahdoot, Samantha W, MD, Pediatric Associates of Alexandria
- Ahmed, Robert F., MD, Virginia Surgery Associates PC - Fair Oaks
- Ajabnoor, Yasser A., MBBS, Graduate Medical Education Office
- Ajmera, Ravi K., MD, Infectious Disease Consultants
- Aksentijevich, Ivan, MD, Virginia Cancer Specialists - Alexandria
- Al Sammarrai, Firas A., MD, Graduate Medical Education Office
- Al-Attar, Ali, MD, PhD, Affiliates in Plastic Surgery
- Alavi, Gelareh Khajenoori, MD, Infectious Disease Consultants
- Albertus, Daniel Leonard, MD, Kaiser Permanente Tysons Corner Medical Center
- Albino, Frank P., MD, Center for Plastic Surgery
- Albrigo, John Louis, MD, Anderson Orthopaedic Clinic - Arlington
- Alexander, Pamela M, MD, Mid Atlantic Permanente Medical Group
- Ali, Mohsin H., MD, Retina Group of Washington - Fairfax
- Ali, Said M., MD, Said M Ali MD PC
- Allabban, Ahmed R., MBBS, Graduate Medical Education Office
- Allen, Jane D, MD, Capital Women's Care
- Allen, Terry Andrea, MD, Terry Allen MD and Scott Forrest MD PLLC
- Almokyad, Ismail K., MD, Graduate Medical Education Office
- Almudallal, Hanya, DPM, Allcare Foot and Ankle Center
- Alsomali, Fatmah A., MD, Graduate Medical Education Office
- Alsterda, Andrew J., MD, Graduate Medical Education Office
- Ambardar, Sujata H., MD, Infectious Diseases Physicians Inc
- Amin, Rasheda Zaheer, MD, Pediatric Specialists of Virginia
- Amin, Shilpa Harshad, MD,
- Amoah, Nana O., MD, Virginia Internal Medicine PC
- Andreoli, Marcelo, MD, Marcelo Andreoli MD
- Ansari, Samreen A, MD, Mid Atlantic Permanente Medical Group
- Ansher, Alan, MD, Digestive Disease Physicians
- Antabli, Bassem A., MD, Mid Atlantic Permanente Medical Group
- Anvari, Afsoon A., MD, Graduate Medical Education Office
- Anwar, Shaz, DO, Capital Caring - Aldie
- Appiah, Yvette E., MD, All Phases Dermatology LLC
- Arabshahi, Bita, MD, Pediatric Specialists of Virginia
• Aram, Ghazaleh, MD, Associates in Gastroenterology
• Arichandran, Narmatha, MD, Capital Area Pediatrics - Herndon
• Armakan, Korosh E., DDS, Dentistry for Children of Northern Virginia
• Arnold, Jacqueline, MD, The Kidz Docs
• Arshad, Aysha, MD, Carient Heart and Vascular PC
• Arshad, Rabia, MBBS, Carient Heart and Vascular PC
• Aryavand, Behdad, MD, Carient Heart and Vascular PC
• Asesor, Maria Concepcion DeLuna, MD, Alexandria Primary Care Associates
• Ashraf, Azra A., MD, Affiliates in Plastic Surgery
• Ashraf, Syed, MBBS, Carelife Medical
• Asmamaw, Abraham Yimer, MD, Integrated Medical Care and Rehabilitation PC
• Asmar, Pierre, MD, Washington Fertility Center
• Asomugha, Eva Umoh, MD, OrthoVirginia Inc
• Assadipour, Yasmine, MD, Virginia Surgery Associates PC - Fair Oaks
• Atiya, Walter L., MD, MedStar Heart and Vascular Institute
• Atiyyeh, Bassam A., MD, Northern Virginia Pediatric Associates
• Awad, Charbel, MD, Annandale OB/GYN
• Azer, Nigel M., MD, Anderson Orthopaedic Clinic - Arlington
• Aziz, Waseem Ismail, MD, GW Medical Faculty Associates
• Aziz-Ashraf, Fatima Zehra, MD, Carelife Medical
• Azzam, Charles J., MD, Charles Azzam MD
• Badalyan, Vahe, MD, Children's National Medical Center
• Badillo, Andrea T., MD, Children's National Health System
• Bae, Catherine J., MD, Northern Virginia Pediatric Associates
• Baeder, Katherine J., MD, Capital Area Pediatrics - Falls Church
• Bajoghli, Mehdi, MD, Allergy Asthma and Sinus Centers
• Bajwa, Harman P.S., MD, Springfield Medical Center - Kaiser Permanente
• Baker, Stephen B., MD, MedStar Georgetown University Hospital
• Baldinger, John C., MD, Capital Eye Consultants
• Baldrate, Christine Z., MD, Northern Virginia Pediatric Associates
• Banaji, Girish, DDS, Banaji Pediatric Dental Specialists
• Banerjee, Jashoman, MD, Washington Fertility Center
• Banihashemi, Michael Reza, MD, Cardiac Care Associates - Fairfax
• Banta, Lisa M., MD, Pediatric Specialists of Virginia
• Barakat, Amin J., MD, Northern Virginia Pediatric Associates
• Barazi, Mohammed Kair, MD, Retina Group of Washington - Manassas
• Barbour, John R., MD, Barbour Plastic Surgery
• Barlow, Haven J., Jr. MD, Chesapeake Plastic Surgery
• Barmaida-Mazid, Serene B., MD, Fairfax Pediatric Associates PC
• Basile, John J., MD, Commonwealth Urology
• Basile, Sean M., MD, Graduate Medical Education Office
• Baugh, James R., MD, Virginia Pediatric Group Ltd
• Baynesaghn, Woldegabriel, MD, Virginia Pediatric Group Ltd
• Bazaco, George C., MD, Pulmonary and Critical Care Specialists of Northern Virginia PC
• Beckinella, Lisa A, DPM, Manassas Foot and Ankle Center
• Beckmann, Robert C., MD, Graduate Medical Education Office
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<td>Solis Sanabria, Carolina Vanessa, MD</td>
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• Stas, Michelle P., MD, Capital Women's Care
• Stashower, Mitchell E., MD, The Clinical Skin Center of Northern Virginia
• Steckler, Leah E., MD, Graduate Medical Education Office
• Stein, Lawrence M., MD, Pulmonary and Medical Associates of Northern Virginia Ltd
• Stenberg, Robert G., MD, Carient Heart and Vascular PC
• Stephenson, Randolph R, MD, Neurology Center of Fairfax
• Stern, Harvey J., MD, Genetics and IVF Institute
• Stern, Lawrence E., MD, Fairfax Colon and Rectal Surgery
• Stern, Neil M., MD, Mid Atlantic Permanente Medical Group
• Stone, Amy R., MD, Neurology Center of Fairfax
• Stormes, Stephanie R., MD, Fairfax OB-GYN Associates PC
• Strahan, Jamison Eugene, MD, The Clinical Skin Center of Northern Virginia
• Strickland, Frank, DDS, Village Oral and Implant Surgery
• Strouse, David A., MD, MedStar Heart and Vascular Institute
• Subramanian, Varagur Bala Ramachandran, MD, Washington Nephrology Associates
• Suh, Yongsook Victoria, MD, Victoria Plastic Surgery Center Inc
• Sun, Kelly J., MD, Graduate Medical Education Office
• Super, Eric J, MD, Graduate Medical Education Office
• Susco, Michelle S., MD, Reston Town Center Pediatrics
• Suskiewicz, Lewis, MD, Virginia Medical Alliance
• Svestka, Michael Grant, MD, Virginia Surgery Associates PC - Fair Oaks
• Swamy, Ravi S., MD, Metropolitan ENT and Facial Plastic Surgery
• Swansiger, Brian J., MD, Mid Atlantic Permanente Medical Group
• Swanson, Katelyn J., DO, Graduate Medical Education Office
• Swanson, Stephanie L., MD, Virginia Women's Health Associates Ltd
• Swelstad, Brad B., MD, Shady Grove Fertility
• Swierzbinski, Matthew J., MD, Infectious Diseases Physicians Inc
• Switaj, Paul Joseph, MD, OrthoVirginia Inc
• Syed, Sadiq N, MD, Sadiq N Syed MD LLC DBA Maryland Retina
• Sylvester, Salvador M., DO, Occupational Medical Services
• Taavoni, Arash, DO, Kaiser Permanente
• Tadros, Reem Kaiser, MD, Fair Oaks Skin Care Center
• Taheri, Hamid, MD, Carient Heart and Vascular PC
• Tahira, Mussarat, MD, Alkarim Medical Clinic
• Takiar, Vani, DMD, Frederick Pediatric Dentistry
• Talib, Sawsan A., MD, Sawsan A Talib MD PLLC
• Tan, Pamela, MD, Bruno Brown Plastic Surgery
• Tandeciarz, Sandra, MD, Vienna Family Medicine
• Tanef, Blake N., MD, Graduate Medical Education Office
• Tanen, S Mark, MD, Endocrine Associates
• Tang, Christine, DO, Metropolitan Pediatrics
• Tattelbaum, Adam G., MD, Washington Plastic Surgery Group
• Tatum, Eileen D., MD, Graduate Medical Education Office
• Tavallali, Morad, MD, Tavallali Plastic Surgery
• Tavani, Nicholas J., MD, Battlefield Family Medicine LLC
• Tebyanian, Naghmeh, MD, Amelia Heart and Vascular Center PC
• Temme, Joel M., MD, Alexandria Internal Medicine
• Testani, Matthew A., DPM, Springfield Medical Center - Kaiser Permanente
• Tetemke, Tesfaye, MD, Skyline Medical Center
• Thadani, Anisha, MD, Associates in Gastroenterology
• Thal, Raymond, MD, Town Center Orthopaedic Associates PC
• Thomaides, Athanasios, MD, MedStar Heart and Vascular Institute
• Thomas, Albert Bruce, II MD, BodyLogicMD of Northern Virginia
• Thomas, Peter Ronald, MD, OrthoVirginia Inc
• Thompson, Daniel E., MD, OrthoVirginia Inc
• Thomson, Eric M., MD, Vienna Family Medicine
• Tieu, Kathy D., MD, The Clinical Skin Center of Northern Virginia
• Tillou, John D., MD, Fairfax Colon and Rectal Surgery
• Todd, Michael McLain, MD, Skin Cancer Center of Northern Virginia
• Todd, Sarah P., MD, Graduate Medical Education Office
• Toyer, April Joy Johnson, DDS, Lifetime Dental Care
• Trahos, Michael C., DO, Trahos Medical Enterprises PLLC
• Tran, Christine L., MD, Capital Women's Care
• Tran, Tricia T., DDS, Kidz Dentistry
• Tran, Vinh B., MD, NOVA Orthopaedics and Sports Medicine Center
• Trigg, David M., DDS, Pediatric Dentistry of Burke
• Trigg, Steven D., MD, Graduate Medical Education Office
• Trinh, Truc T., MD, Gastroenterology Center of Northern Virginia
• Truong, Anh N, MD, Vienna Family Medicine
• Tsai, John T, MD, Fairfax Pediatric Associates PC
• Tsang, Christopher W., MD, ENT and Facial Plastic Surgery
• Tyabji, Alifiya Abizer, MD, NOVA Pediatrics Ltd
• Tylenda, Carleen, MD, Mount Vernon Internal Medicine - Alexandria
• Udoff, Laurence C., MD, Genetics and IVF Institute
• Umapathy, Siddardth, DO, Graduate Medical Education Office
• Umfrey, Leah T., MD, Graduate Medical Education Office
• Unikel, Melody R., MD, Virginia Pediatric Group Ltd
• Uyemura, Trevor M., MD, Infectious Disease Consultants
• Vakharia, Priya S, MD, Retina Group of Washington - Fairfax
• Vamadevan, Arunan Siva, MD, Associates in Gastroenterology
• Vandervort, Gene Allen, Jr. MD, DDS, Loudoun Oral and Maxillofacial Surgery
• Varela, Carly, MD, Pediatric Specialists of Virginia
• Vargas, Hernan I., MD, Virginia Cancer Specialists - Fair Oaks
• Varma, Jay D., MD, Vascular and Interventional Associates of Fairfax Radiological Consultants
• Varnell, Crandall K., MD, Graduate Medical Education Office
• Vasta, Lauren M., MD, Graduate Medical Education Office
• Vaughns, Janelle D., MD, Children's National Medical Center
• Vemana, Srikrishna, MD, Northern Virginia Gastrointestinal Associates Ltd
• Venturi, Mark L., MD, National Center for Plastic Surgery
• Verma, Anil, MD, Anil Verma MD PC
• Verma, Kapil D., MD, NOVA Wound Care PC
• Vernon, Hamilton S., DO, Graduate Medical Education Office
• Vetter, Steven R., DPM, Oakton Foot and Ankle Center PLLC
- Vigliante, Craig Ernest, MD, DMD, Potomac Surgical Arts PC
- Villa, Marcella, MD, Fairfax Pediatric Associates PC
- Vitek, Brantley P., Jr. MD, OrthoVirginia Inc
- Vivatrat, Nita, MD, Virginia Pediatric and Adolescent Center
- Voigt, Stanley, MD, Associates in Otolaryngology
- Von Pechmann, Walter S., MD, Mid Atlantic Urogynecology and Pelvic Surgery
- Vo-Nguyen, Trang T, MD, The Virginia Institute for Surgical Arts
- Vu, Thuy-Anh H., MD, Pediatric Specialists of Virginia
- Waddell-Jiggetts, Beverly J., MD, Mid Atlantic Permanente Medical Group
- Wadlow, Raymond Couric, MD, Virginia Cancer Specialists - Fairfax
- Wahba, Leina M., MD, Capital Area Pediatrics - Vienna
- Waldman, Jeffrey T., MD, Family Medicine of Clifton/Centreville
- Waldman, Lindsey A., MD, Pediatric Specialists of Virginia
- Walker, Clayton L., MD, NAPA Anesthesia Services - IMVH
- Walker, Sheneika M., MD, Mid Atlantic Permanente Medical Group
- Wallach, Corey J., MD, Anderson Orthopaedic Clinic - Arlington
- Waller, Allison Christine, MD, Pediatric Associates of Alexandria
- Walter, Barry Frederick, MD, Virginia Surgery Associates PC - Fair Oaks
- Walters, Suzanne J, MD, Nirschl Orthopaedic Center
- Wang, Allen F., MD, Graduate Medical Education Office
- Wang, Julie Y, DO, Fairfax Internal Medicine Associates
- Warach, Shahid A., MD, Fort Belvoir Community Hospital
- Wasan, Anita Nanda, MD, Allergy and Asthma Center
- Waseem, Samia, MD, Raiqa Munis MD PC
- Watkin, Terry, MD, Pediatric Specialists of Virginia
- Watkins, Frederick H., MD, Washington Plastic Surgery Group
- Watson, Charles H., MD, Capital Area Pediatrics - Falls Church
- Watts, Elizabeth H., MD, Capital Area Pediatrics - Vienna
- Waud, Kay I., MD, Dominion Fertility and Endocrinology
- Waxman, Phyllis Gail, MD, Capital Area Pediatrics - Falls Church
- Way, Emily E., MD, Pediatric Specialists of Virginia
- Webb, Meredith M., MD, e-ICU
- Weber, Jacquelyn M., MD, Mitchell Eye Institute PC
- Weidner, Zachary David, MD, The Centers for Advanced Orthopaedics
- Weingold, Daniel E., MD, OrthoVirginia Inc
- Weimroth, Stephen E., MD, Infectious Disease Consultants
- Weintritt, David C, MD, National Breast Center
- Welgoss, Jeffrey A., MD, Mid Atlantic Urogynecology and Pelvic Surgery
- Weskamp, Andrew L., DO, Graduate Medical Education Office
- West, Lee-Anne S., MD, Capital Caring - Aldie
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- Wijetilleke, Padma, MD, Padma Wijetilleke MD
- Wills, Bradley W., MD, Anderson Orthopaedic Clinic - Mt Vernon
- Wilson, Eleanor Anne, DPM, Springfield Medical Center - Kaiser Permanente
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- Witmer, Claire P., MD, Graduate Medical Education Office
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- Zeilberger, Christina C., MD, TPG Pediatrics
- Zweig, Louis K, MD, Northern Virginia Family Practice Associates

Updated June 2020
**Appendix C**

### Financial Assistance - Required Documentation Checklist

**Date** _____ / _____ / _____

**Patient** ____________________________

**Medical Record # or Guarantor # ____________________________

**Dear Patient/Guarantor:**

In addition to completing the Inova Financial Assistance application, you will need to provide proof of your income and residency. Note that certain documents can be used for both income and residency documentation.

**Income Documentation**

- Proof of Family Income - Spouse or Domestic Partner income is needed
  - **Must include at least two (2) of the following documents:**
    - Two Recent Paystubs
    - Most Recent Federal Income Tax Return
      (**Instructions Below**)
    - Monthly Bank Statement with Applicant’s Name and Current Address
      *(Must be issued by a bank within the last 90 days reflecting deposits)*
    - Notarized Verification of Employment
      *(Form/Letter completed By Employer)*
    - Notarized Verification of Support
      *(Form/Letter completed by Spouse/Partner/Self-Declaration)*
    - Government Assistance Program/Public Assistance Benefit Letter
    - Social Security Benefit Letter
    - 109 Form (International Students)
    - Pension/Retirement Income
    - Survivor Benefits
    - Unemployment Compensation
    - Interest Dividends/Royalties/Income from Estate/Trust
    - Education/Tuition Assistance Documentation
    - Alimony/Child Support Documentation
    - Ambassador Status Verification on Embassy Letterhead
    - Third-Party Income Verification
      *(Home Lease, Purchase Application, Automobile Lease, Loan Application, etc.)*

**Residency Documentation**

- Proof of 90 days residency within the Inova Service Area
  - **Must include at least two (2) of the following documents:**
    - Valid Virginia Issued Driver License or Identification Card
      *(Must be issued at least 90 Days prior to date of service)*
    - Most Recent Federal Income/State Income Tax Return
      (**Instructions Below**)
    - Monthly Bank Statement with Applicant’s Name and Current Address
      *(Must be issued at least 90 Days prior to date of service)*
    - Notarized Verification of Residency
      *(Form/Letter completed by Landlord)*
    - Utility Bill (Gas, Electric, Sewer, Water, Cable etc.) with Applicant’s Name and Current Address
      *(Must be issued at least 90 Days prior to Date of Service)*
    - Current Auto Insurance Policy or Home Insurance Policy Bill with Applicant’s Name and Current Address
    - Lease Agreement
    - Virginia Voter Registration Card
    - Receipt for personal property taxes or real estate taxes paid within the last year to the Commonwealth of Virginia or a Virginia locality
    - Virginia Department of Education Certificate of Enrollment
      *Certified copy of school records/transcripts issued by a school accredited by a U.S. state jurisdiction or territory*
    - DMV Records
    - Immigration Residency Certification Document
    - W2

**Multi-Use Documentation**

- The following items can be used as proof of (1) Income and (1) Residency in one document:
  - Most Recent Federal Income Tax Return
    (**Instructions Below**)
  - Monthly Bank Statement with Applicant’s Name and Current Address
    *(Must be issued by a bank within the last 90 days)*
  - Notarized Verification of Support
    *(Form/Letter completed by Spouse/Partner/Self-Declaration)*

Failure to submit the requested documents will result in the DENIAL of your application, leaving you responsible for the entire balance. For any question or if you need more time to gather the documents requested, please call 571-423-5880. If you prefer to send the verifications via fax, please fax to 571-423-5886.

**Tax Return –** When submitting taxes completed by a firm or business please submit full document with date and signature. When submitting self-prepared taxes, please submit full documentation signed and dated.

**Once verifications of income, residency and family size are received, please allow 30 days for processing**

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**IMPORTANT!**

Attach documents to this sheet and mail within fifteen (15) days to:

Inova Health System
 Patient Financial Services
 8095 Innovation Park Drive, Suite 501
  Fairfax, VA 22031
Notice of Non-Discrimination

As a recipient of federal financial assistance, Inova Health System (“Inova”) does not exclude, deny benefits to, or otherwise discriminate against any person on the basis of race, color, national origin, sex, disability, or age in admission to, participation in, or receipt of the services or benefits under any of its programs or activities, whether carried out by Inova directly or through a contractor or any other entity with which Inova arranges to carry out its programs and activities.

This policy is in accordance with the provisions of Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, Section 1557 of the Affordable Care Act, and regulations of the U.S. Department of Health and Human Services issued pursuant to these statutes at 45 C.F.R. Parts 80, 84, 91 and 92, respectively.

Inova:

* Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  * Qualified sign language interpreters
  * Written information in other formats (large print, audio, accessible electronic formats, other formats)

* Provides free language services to people whose primary language is not English, such as:
  * Qualified interpreters
  * Information written in other languages

If you need these services, please let our staff know of your needs for effective communication.

If you believe that Inova has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance by calling 703.205.2175. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Patient Relations staff is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201 1-800-868-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html
**Interpreter Services are available at no cost to you.**

**Please let our staff know of your needs for effective communication.**

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<td>Spanish</td>
<td>Atención: Si usted habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Por favor infórmele a nuestro personal sobre sus necesidades para lograr una comunicación efectiva.</td>
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<td>알려드립니다: 귀하가 한국어를 구사한다면 무료 언어 도움 서비스가 가능합니다. 효과적인 의사전달을 위해 필요한 것이 있다면 저희 실무자에게 알려주시기 바랍니다.</td>
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<td>Vietnamese</td>
<td>Chú ý: Nếu quý vị nói tiếng Việt, dịch vụ hỗ trợ ngôn ngữ có sẵn miễn phí cho quý vị sử dụng. Xin vui lòng thông báo cho nhân viên biết như cấu của quý vị để giao tiếp hiệu quả hơn.</td>
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<td>Chinese</td>
<td>注意：如果你說中文，可以向你提供免費語言協助服務。請讓我們的員工了解你的需求以進行有效溝通。</td>
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<tr>
<td>Arabic</td>
<td>انتباه: إذا كنت تتحدث العربية، توفر الخدمات المجانية للمساعدة في اللغة. يرجى إعلام فريق العمل بحاجتك من أجل الحصول على عملية تواصل فعالة.</td>
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<td>Farsi</td>
<td>توجه: اگر به زبان فارسی صحبت می‌کنید، تاکید دارم که باید به صورت را یگان برای شما در اینترنت بروید. بی‌مشارکت به‌صورت خودمکت، یک کارگر یا مترجم خودمکت را از نظر شما جهت مطالعه یا مترجم خودمکت را از نظر شما در نظر گرفته‌دیدی.</td>
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<tr>
<td>Amharic</td>
<td>የትግግል ላይ ዋለ ከነጉ የሸንት ዝተለስ ከተለ ለማየት ከተለ ይለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከተለ ከutarvi vi ngut ngur ngur sóan mi n phi cho quy vı` sûr dux. Xin vui lòng thông báo cho nhân viên biết như cấu của quý vị để giao tiếp hiệu quả hơn.</td>
</tr>
<tr>
<td>Chinese</td>
<td>注意：如果你說中文，可以向你提供免費語言協助服務。請讓我們的員工了解你的需求以進行有效溝通。</td>
</tr>
<tr>
<td>French</td>
<td>Attention: Si vous parlez Français, des services d’aide linguistique vous sont proposés gratuitement. Veuillez informer notre personnel de vos besoins pour assurer une communication efficace.</td>
</tr>
<tr>
<td>Russian</td>
<td>Внимание: Если вы говорите на русском языке, для вас доступны бесплатные услуги помощи с языком. Для эффективной коммуникации, пожалуйста, дайте персоналу знать о ваших потребностях.</td>
</tr>
<tr>
<td>Hindi</td>
<td>कृपया ध्यान दें : यदि आप हिंदी बोलते हैं, तो आपके लिए निष्ठुल भाषा सहायता सेवा उपलब्ध है। कृपया प्रामाण्य संघर्ष-संपर्क हेतु अपनी आवश्यकताओं के बारे में हमारे कर्मचारियों को बताएं।</td>
</tr>
<tr>
<td>German</td>
<td>Achtung: Wenn Sie Deutsch sprechen, stehen kostenlose Service-Sprachdienstleistungen zu Ihrer Verfügung. Teilen Sie unserem Team bitte Ihre Wünsche für eine effektive Kommunikation mit.</td>
</tr>
<tr>
<td>Bengali</td>
<td>বাংলা আচর্ণ করুন : আপনি যদি বাংলা বলেন, তাহলে আপনার জন্য বিশ্বস্ত ভাষা সহায়তা সেবা পাওয়া যাবে। অনুরূপ কর্মচারী যোগাযোগের জন্য আপনার প্রাথমিকভাবে বিশেষ আচরণের কর্মীর জন্য।</td>
</tr>
<tr>
<td>Kru (Bassa)</td>
<td>Tô Đëw N’Mɔ̀ Dyɨ̀n C’ɔ̀; Ê jè kë më ñò dëw-producing (Bâsɔɔ-wàdû) po nì ni, ñ bëdë go-pa-kpà kpà bò wàdû-dû kò-kò po-njò bè bë nì à gò bò pûtí. M ñ dëw dëk bò nì à gò nì, ñ më nyût ëc à kàà-njò bè bë dè yì bë, kë à kë mò kë më jë cët nà nòmò dyìm.</td>
</tr>
<tr>
<td>Ibo</td>
<td>Nnụ́rze: O bùrù na i na asụ lgbo, ọrụ enyemaka asusu, n’efu, diịri gị. Bikọ mee ka ndị ọrụ anyi mara mkpa gị maka nkwoọrọta ga-agà nke ọma.</td>
</tr>
<tr>
<td>Yoruba</td>
<td>Akiyesi: Bi o ba nso Yoruba, awọn iṣe iiranlọwọ ede wa l’ọfe fun ọ. Jowo je ki ara ibiṣe wa mọ nipa awọn aini re fun ibaraẹnisoọ n’ti o munado.</td>
</tr>
</tbody>
</table>