



## Emergency Financial Assistance Program (EFA)

### **PURPOSE:**

The purpose of the Emergency Financial Assistance Program (EFA) is part of the Hemophilia Foundation of Southern California's continuing effort to improve the quality of life of individuals and families affected by bleeding disorders. HFSC provides financial support, based on availability of funding, to help pay for:

- Expenses incurred in the care, treatment, or prevention of a bleeding disorder;
- Health insurance premiums
- Transportation services to HTC's;
- Basic living expense emergency (rent, mortgage, utilities, etc)

### **ELIGIBILITY:**

Prospective applicants will need to meet the following criteria:

- Be a resident of Los Angeles, Orange, Kern, San Bernardino, Riverside, San Luis Obispo, Ventura and or Santa Barbara Counties.
- Applicant must be an active member of HFSC. An active member is defined as an individual who is in the HFSC database and is an adult with a bleeding disorder or be a parent or caregiver of a minor child who lives in your home and who has a diagnosis of a bleeding disorder OR be an individual with a diagnosed bleeding disorder.
- HFSC requires requesting assistance from at least three (3) other agencies and/or family members before applying to HFSC for funding. Please provide any relevant contact information for those agencies and/or family members and the status of your request.

### **ADMINISTRATION:**

Financial assistance depends on the availability of funds and applicant eligibility. Funding is not guaranteed. ***Applicants should allow at least 14 business days for HFSC to process their request.***

Assistance is limited to one grant per year per family with a maximum of \$500. If assistance has been previously granted within the year, referrals will be made to other local, state and/or regional organizations. If the same household has requested assistance for more than three (3) consecutive years, applicant will be referred to Hemophilia Federation of America's Helping Hands Program. Any appeals of this policy will be made upon request to HFSC's Board of Directors. The Emergency Financial Assistance program (EFA) at HFSC is not meant to be used to remedy chronic financial problems.

If the applicant is seen at an HTC, applicant's social worker should make the referral or confirm the need.

***HFSC cannot provide funding directly to the individual applicant(s).*** Disbursements will be made directly to vendors identified in the application that have been verified by HFSC. In the case of a request for food, the requesting staff person will facilitate expenditure without giving cash directly to the applicant(s).

**Hemophilia Foundation of Southern California**

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HFSC is payment of last resort and it is required that other payment resources be investigated including government-sponsored programs and other charitable organizations before contacting HFSC.

HFSC staff will review applications for completeness. If the assistance request does not provide the necessary information, HFSC staff member will contact the applicant for additional details. If the request cannot be completed, then it will be denied and a new application will need to be completed and submitted.

Once HFSC staff receives the completed assistance request, the application will be reviewed by EFA Committee within one week of receipt. Assistance provided will be based on the sole discretion of HFSC EFA Committee.

HFSC staff will notify the applicant about the decision within two business days of the EFA committee meeting via email or phone communication. In most cases, approved applicants can expect a total of two-three weeks for the entire process and payment to be submitted.

Please submit all applications along with relevant bills.

Due to the office closure during the COVID-19 pandemic, please contact Cynthia Chavez, Outreach Manager, for details on submitting your application.

[cynthia@hemosocal.org](mailto:cynthia@hemosocal.org) or 626-765-6656

### **CONFIDENTIALITY**

Applicants and information pertaining to funding requests are considered confidential to the full extent permitted by law.

Information from HFSC's Emergency Financial Assistance Program applications may be compiled for statistical purposes and for compliance with local, state, federal, or affiliate organization requirements. However, any publication of this data will be in aggregate form only and will not include names or any other information that could be used to identify individual applicants or recipients.

No personal information will be used or disclosed for any purposes other than that for which it was collected without the applicant's written permission. At no time will personal information be shared with any individual, company, and organization outside the Hemophilia Foundation of Southern California.