

# Support Letter for Charity Care Eligibility

Date: [Insert Date]

To Whom It May Concern,

I am writing to express my support for [Patient's Name], who is applying for charity care eligibility. As [his/her/their] [relationship, e.g., physician, social worker, friend], I have witnessed firsthand the challenges that [he/she/they] faces in managing [his/her/their] health and financial situation.

[Patient's Name] has been dealing with [briefly describe medical condition or situation] which has significantly impacted [his/her/their] ability to work and maintain a stable income. Despite these hardships, [he/she/they] has shown resilience and determination to improve [his/her/their] health and quality of life.

It is crucial for [Patient's Name] to receive the necessary medical care without the burden of overwhelming costs. Granting charity care eligibility will enable [him/her/them] to focus on [his/her/their] recovery and well-being.

I fully support [Patient's Name]'s application and hope you will consider [his/her/their] circumstances with compassion and understanding. Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Title/Position]

[Your Contact Information]

[Your Address]