Atrium Health Navicent was incorporated on November 17, 1994 as a nonprofit corporation whose purpose is to coordinate Atrium Health Navicent The Medical Center and other affiliated entities toward our mission: To improve health, elevate hope and advance healing - for all.

Today, Atrium Health Navicent has more than 1,000 beds for medical, surgical, rehabilitation and hospice purposes, offers over 53 specialties in more than 50 facilities throughout the region and hosts over 100 medical residents and fellows.

Included within the Atrium Health Navicent system is Atrium Health Navicent The Medical Center, a 637 bed, nationally-verified Level I-designated Trauma Center and a four-time Magnet Designated hospital for nursing excellence worldwide.

Maternal Benefit Assistance

We consider it a privilege to be your Regional Perinatal Center and we would like to take some of the financial burden off of your family. With funds provided by the Department of Public Health, we can help pay your hospital bill.

Maternal Data and Grant Coordinator
478-633-2664
McKenzie.Jones@AtriumHealth.org
**About the Program**

In 1972, the Department of Public Health divided the state of Georgia into 6 regions. Each region was assigned a Regional Perinatal Center (RPC) to provide high-risk care for both mothers and babies to support the other hospitals in the region.

Atrium Health Navicent The Medical Center is the RPC for Central Georgia. When a maternal patient in one of our regional hospitals needs a higher level of care, our Maternal-Fetal Medicine specialists (perinatologists) accept the patient and provide the care they need. If a baby is expected to need care in our neonatal intensive care unit after birth, we will transport the mother prior to delivery, so we can keep mom and baby together.

**Who Is Eligible**

This benefit is only available to Georgia residents.

In order to qualify for up to **$6,000** you must meet both medical and financial eligibility requirements. *Medical eligibility will be determined based on identified diagnosis from your hospitalization.*

Balances will be reviewed after insurance has paid. We realize medical expenses can be difficult to pay, especially right after a hospital stay. The requirement for meeting financial eligibility is based on the number of people living in your home and the total household income. To qualify, your total household income cannot exceed 250% of the federal poverty level.

If you qualify, we will send you a letter letting you know that we will apply our funds to your account. The maximum amount allowed is $6,000. If you do not qualify, we will still send a letter letting you know that we were unable to apply funds to your account and why you did not qualify.

For more information on this program, please contact the maternal data and grant coordinator.

---

**Examples of Medical Eligibility**

- Vaginal delivery after cesarean delivery
- Obesity
- Tobacco, alcohol or drug use
- Over the age of 34
- Breech presentation
- Hypertension
- Repeat cesarean delivery
- Bleeding disorders
- Fetal growth restriction
- Too much/little amniotic fluid
- Multiple babies (twins, triplets)
- Sickle cell anemia
- Prolapsed umbilical cord
- 5 or more pregnancies
- Hyperemesis (vomiting)
- Preterm contractions
- Premature delivery
- Epilepsy/Seizures
- Infections
- Diabetes
- Asthma
- HIV/AIDS