

Community Care

Income Guidelines

March 2017 - March 2018

Family Size	100% Discount
1	\$24,100
2	\$32,480
3	\$40,840
4	\$49,200
5	\$57,560
6	\$65,920
7	\$74,280
8	\$82,640
9	\$91,000
10	\$99,360

The Patient Financial Service staff will be happy to assist you with applications for other financial programs you may be eligible for and the *Community Care* application.

Please contact a representative at
920-433-8122 or **Toll Free, 800-211-2209**.

For more information, visit our *websites*

HSHS St. Vincent
Hospital | 835 S. Van Buren Street
Green Bay, WI 54301

HSHS St. Mary's
Hospital Medical Center | 1726 Shawano Avenue
Green Bay, WI 54303

HSHS St. Nicholas
Hospital | 3100 Superior Avenue
Sheboygan, WI 53081

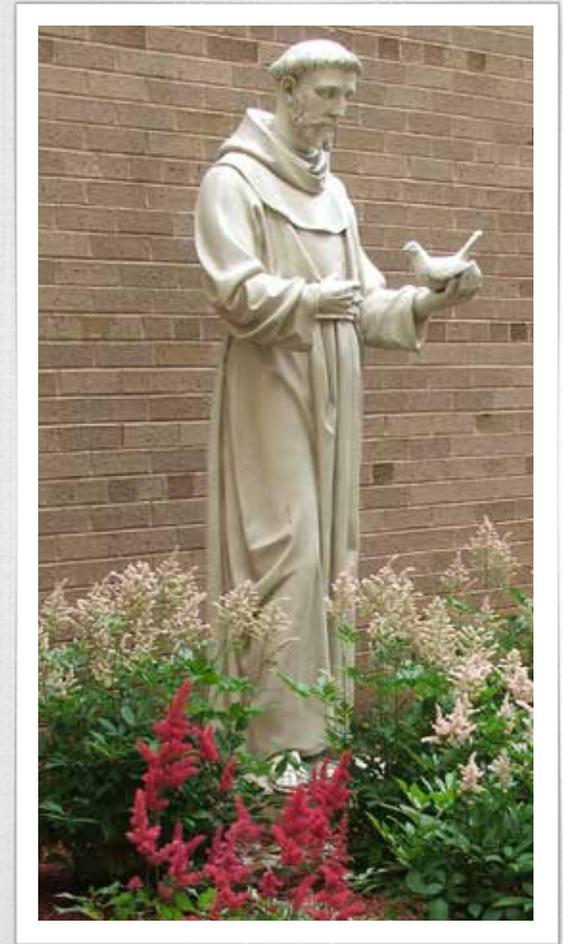
HSHS St. Clare
Memorial Hospital | 855 Main Street
Oconto Falls, WI 54154

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stvincenthospital.org
stmgb.org
stnicholashospital.org
stclarememorial.org

Financial Assistance Programs

Community Care Assistance



one family



Our *mission*

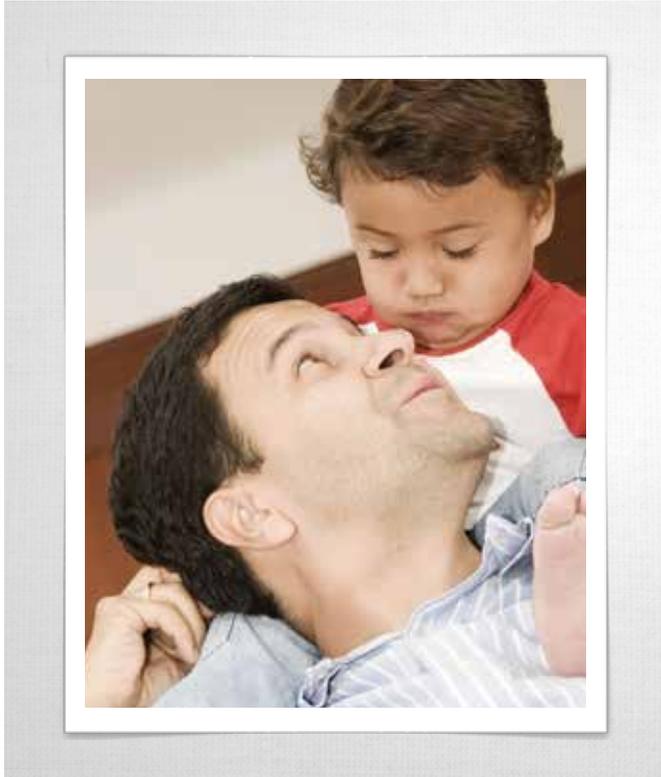
Every person is entitled to good health care and to be treated with dignity. As a Catholic health care provider, HSHS St. Vincent, HSHS St. Mary's, HSHS St. Nicholas and HSHS St. Clare Memorial Hospitals are committed to delivering care to everyone who comes for help, regardless of his or her ability to pay.

Care for the poor has always been a part of our mission. Even in difficult times, first class care for everyone is our commitment.

To help meet that goal, HSHS St. Vincent, HSHS St. Mary's, HSHS St. Nicholas and HSHS St. Clare Memorial Hospitals have established a financial assistance program called Community Care.

Help offered

The hospitals have set eligibility requirements for those who request assistance. The guidelines are not meant to discourage anyone from seeking treatment. They are designed to ensure the hospital's resources are used for those least able to pay.



To apply for *Community Care*

Eligibility is based upon income guidelines. Income includes any cash, savings and investments. If after reviewing the income guidelines listed on this brochure you think you might qualify for Community Care, you may request an application by contacting the Patient Financial Service Department at 920-433-8122 or 1-800-211-2209.

If *you qualify* for Community Care

You will receive notification that your application has been approved and the amount that will be waived through Community Care.

If you *don't qualify* for Community Care Notification explaining why you are not eligible for the Community Care program will be sent to you.

Payment arrangements will need to be made within 10 days after receiving notification that you did not qualify for assistance. Arrangements can be made by calling the Patient Financial Service Department at 920-433-8122 or 1-800-211-2209.

Uninsured financial assistance program

Patients who do not have health insurance will receive a discount on their bill. Further assistance may be available by calling the Patient Financial Service Department at 920-433-8122 or 1-800-211-2209.

You may also be *eligible* for:

- Medical Assistance
- Crime Victims
- Cobra Benefit Coverage

