



SUMMARY OF FINANCIAL ASSISTANCE POLICY

Liberty Medical Center will provide emergency and medically necessary healthcare services for free or at discounted rates to certain patients who are uninsured or have limited insurance available. Our financial assistance is for services provided and billed through Liberty Medical Center. A list of the providers can be found at www.libertymedicalcenter.org/about-us/providers. Locum medical providers providing care in the clinic or hospital will be covered under this policy. This assistance, ranging from a reduction in the amount of the balance outstanding up to complete forgiveness of the balance outstanding, is provided to patients demonstrating financial need and meeting the eligibility criteria of the policy. Patients eligible for discounted charges must have family incomes under 200% of the Federal Poverty Guidelines, while patients eligible for free care must have family incomes under 100% of the Federal Poverty Guidelines.

The assistance is provided on a sliding scale discount based upon verifiable total household income as a percentage of the federal poverty level (FPL) guideline. Please reference the following table:

Annual Family Income	Minimum Discount
100% or less FPL	100%
101-125%	80%
126-150%	60%
151-175%	40%
176-199%	20%
200% or above FPL	0%

Patients seeking financial assistance may apply by completing a Financial Assistance Application. Copies of the *Financial Assistance Application*, as well as Liberty Medical Center's *Financial Assistance Policy*, are available at www.libertymedicalcenter.org/financial-services. Patients may also request free copies of the application and the policy by mail, by calling 406-759-5151 or obtain free copies in person at Liberty Medical Center Clinic Admissions or Liberty Medical Center Ancillary Admissions at:

- 418 West Monroe Avenue, Chester, MT 59522
- 315 West Madison Avenue, Chester, MT 59522

Completed Financial Assistance Applications and required supporting materials may be submitted by:

- Hand-delivering to the Financial Assistance Counselor or to any admission staff at either address shown above.
- Mailing to Liberty Medical Center, Attn: Financial Assistance Counselor, PO Box 705, Chester, MT 59522

Persons seeking more information or needing assistance in completing the Financial Assistance Application may contact the Financial Assistance Counselor at 406-759-6508.

A patient qualifying for financial assistance will not be charged more than the amounts generally billed by the Hospital for the same services to individuals who have insurance covering such care.

If your total household income exceeds the maximum 200% percent of the FPL, yet you have supplied additional documentation to support the hardship your medical condition has caused for you and your family, you may be considered on a case-by-case basis for assistance.

Liberty Medical Center will not engage in extraordinary collection activities, such as lawsuits or garnishments, before making reasonable efforts to determine whether an individual who has an unpaid account is eligible for financial assistance.