

BIG SANDY MEDICAL CENTER, INC.

166 Montana Avenue East, P. O. Box 530

Big Sandy, Montana 59520-0530

Business Phone 406-378-2188

FAX 406-378-2180

NOTICE OF AVAILABILITY OF FINANCIAL ASSISTANCE (CHARITY CARE PROGRAM)

Big Sandy Medical Center (BSMC) will provide financial assistance to persons who are unable to pay for medical services and who meet the charity care policy guidelines. *An account in bad debt collections will not be considered for the sliding fee scale without administrative approval.* **A minimum payment of \$20 is required before any discount is applied.** Those meeting policy guidelines will be considered for reduced cost in accordance with the schedule below. Charity care applies only to hospital services, not for clinic or nursing home services. Individuals eligible for financial assistance will not be charged more than the amounts generally billed for emergency or other medically-necessary care.

	50% Account Reduction	25% Account Reduction	0% Account Reduction
Family Size			
1	17,820	20,790	23,760
2	24,030	28,035	32,040
3	30,240	35,280	40,320
4	36,450	42,525	48,600
5	42,660	49,770	56,880
6	48,870	57,015	65,160
7	55,095	64,278	73,460
8	61,335	71,558	81,780
Discount Calculation = Account Balance x Reduction Amount			
Poverty Level	133%	166%	200%

Patients seeking consideration for charity care may apply by completing a Financial Assistance Application. Copies of the financial assistance policy and application are available at www.bsmc.org. Patients may also request free copies of the financial assistance policy and application by mail, by calling 406-378-2188, or may obtain free copies in person from the Business Office located at 166 Montana Avenue East, Big Sandy, MT 59520.

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

- Hand delivering to the Business Office at the address listed above.
- Mailing to Big Sandy Medical Center, Attn: Business Office P.O. Box 530 Big Sandy, MT 59520.