

# 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 (SLIDING FEE SCHEDULE)

**Big Sandy Medical Center (BSMC)** will provide financial assistance to persons who are unable to pay for medical services and who meet the sliding fee schedule policy guidelines. *An account in bad debt collections will not be considered for the sliding fee scale without administrative approval. A minimum payment of \$10 is required before any discount is applied.* Those meeting policy guidelines will be considered for reduced cost in accordance with the schedule below. This sliding fee scale applies only to clinic services, not for hospital 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

	<b>Minimum Fee (\$10.00)</b>	<b>25% Pay</b>	<b>50% Pay</b>	<b>75% Pay</b>	<b>100% Pay</b>
<b>Family Size</b>					
1	11,880	15,800	19,721	23,760	23,879
2	16,020	21,307	26,593	32,040	32,200
3	20,160	26,813	33,466	40,320	40,522
4	24,300	32,319	40,338	48,600	48,843
5	28,440	37,825	47,210	56,880	57,164
6	32,580	43,331	54,083	65,160	65,486
7	36,730	48,851	60,972	73,460	73,827
8	40,890	54,384	67,877	81,780	82,189
<b>Patient Payment = BSMC Charges x appropriate payment percentage.</b>					
<b>Poverty Level</b>	100%	133%	166%	200%	201%

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](http://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 Clinic or 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 Clinic or Business Office at the address listed above.
- Mailing to Big Sandy Medical Center, Attn: Business Office P.O. Box 530 Big Sandy, MT 59520.

9/26/2016