

**COMMUNITY MEMORIAL HOSPITAL ASSOCIATION
512 SKYLINE BLVD
CLOQUET, MN 55720**

Plain Language Summary – Financial Assistance Policy

Do you need help paying for health care?

Financial Assistance we offer: **Community Care Program**

- Anyone can apply
- Forms available on our website at www.cloquethospital.com
- Or call 218-878-7069 to have the application mailed to you or request an appointment for help filling out the form
- Or pick one up at the hospital
- CMH accepts Community Care application for all open accounts regardless of the service/discharge date. Patients that qualify must meet income guidelines as follows:

Federal Poverty Guidelines
200% or below
Up to 250%

Discount
100% Discount and no patient responsibility
Sliding Scale up to 50% patient responsibility

| Number of Family Members | Poverty guideline | 200% of Poverty Guidelines | 250% of Poverty Guidelines |
|---------------------------------|--------------------------|-----------------------------------|-----------------------------------|
| 1 | \$12,060 | \$24,120 | \$30,150 |
| 2 | \$16,240 | \$32,480 | \$40,600 |
| 3 | \$20,420 | \$40,840 | \$51,050 |
| 4 | \$24,600 | \$49,200 | \$61,500 |
| 5 | \$28,780 | \$57,560 | \$71,950 |
| 6 | \$32,960 | \$65,920 | \$82,400 |
| 7 | \$37,140 | \$74,280 | \$92,850 |
| 8 | \$41,320 | \$82,640 | \$103,300 |

Patients determined to be eligible for financial assistance will not be charged more than amounts generally billed for emergency or other medically necessary care to patients who have insurance that covers that care.