Gundersen Boscobel Area Hospital and Clinics
Summary of Financial Assistance Policy

Gundersen Boscobel Area Hospital and Clinics is a not-for-profit system with a mission to provide excellence in patient care, education, research and improved health in the communities it serves. We will be a health system of excellence, nationally recognized for improving the health and well-being of our patients and their communities. We are committed to providing emergency and medically necessary health care services to patients regardless of their ability to pay

For patients, and patient guarantors, with limited financial resources, Gundersen Boscobel Area Hospital and Clinics has established a financial assistance program to help them in paying for their medical care.

Eligibility

Patients of Gundersen Boscobel Area Hospital and Clinics with annual family incomes of less than four-times the federal poverty level, and within asset limit thresholds will be eligible for Gundersen Boscobel Area Hospital and Clinics financial assistance. For more information about current poverty guidelines, please visit the Assistance Secretary for Planning and Evaluations of the US Department of Health and Human Services website at http://hhs.gov.

Type of Assistance

Family income and assets will be considered when making an eligibility determination on financial assistance. Free care is available to patients with limited assets and family income equal to or less than two-times the federal poverty level. Discounted care is available to patients with limited assets and family income between two and four-times the federal poverty level. Patients not meeting these eligibility guidelines, but with extraordinarily high medical expenses, may qualify for catastrophic care assistance.

Fees Charged to Patients Eligible for Financial Assistance

Patients eligible for financial assistance, and having no insurance coverage, may be granted a discount on Gundersen Boscobel Area Hospital and Clinics bills for emergency and medically necessary care that is equal to that charged to insured patients, specifically those covered by Medicare and/or private health insurers.

For More Information

Information on the Gundersen Boscobel Area Hospital and Clinics financial assistance policy is available upon request. An application for Gundersen Boscobel Area Hospital and Clinics financial assistance is available on our website at www.gundersenhealth.org/boscobel

To request a complete financial assistance policy, a financial assistance application, or assistance completing the application, contact:

Gundersen Boscobel Area Hospital Clinics
Customer Financial Services
Boscobel, WI 53805
(608) 375-4112, ext. 63748 or (608) 375-6215
(866)662-2242 ext. 63748

INCOME THRESHOLDS

The following figures are based on the 2016 HHS poverty guidelines which were published in the Federal Register on January 25, 2016.

Persons in family/household	Poverty Guideline (100%)	200% of Poverty	400% of Poverty
1	$11,880	$23,760	$47,520
2	$16,020	$32,040	$63,720
3	$20,160	$40,320	$80,360
4	$24,300	$48,600	$97,000
5	$28,440	$56,880	$113,640
6	$32,580	$65,160	$130,280
7	$36,730	$73,460	$146,920
8	$40,890	$81,780	$163,560

For families/households with more than 8 persons, add $4,160 for each additional person.

ASSET THRESHOLDS

Persons in family/household	600% Asset Level
1	$71,280
2	$96,120
3	$120,960
4	$145,800
5	$170,640
6	$195,480
7	$220,380
8	$245,340