Financial Assistance Policy  
(GMV-2555)  
Appendix 5  

Public Access to Policy  

Information on the Moundview Financial Assistance Policy, and the Moundview Self-pay Billing and Collection Policy will be made available to patients and the community served by Moundview through a variety of sources.

1. Patients and guarantors may request copies of the Financial Assistance Policy, the Self-Pay Billing and Collection Policy, the Financial Assistance Application, and/or the Plain Language Summary via mail at:

   Gundersen Moundview Hospital and Clinics  
   Patient Financial Service  
   402 West Lake Street, P.O. Box 40  
   Friendship, WI 53934

2. Patients and guarantors may request copies of the Financial Assistance Policy, the Self-Pay Billing and Collection Policy, the Financial Assistance Application, and/or the Plain Language Summary via phone at (608) 339-8466.

3. Patients and guarantors may download copies of the Financial Assistance Policy, the Self-Pay Billing and Collection Policy, the Financial Assistance Application, and/or the Plain Language Summary via www.gundersenhealth.org/moundview.

4. Patients and guarantors may request copies of the Financial Assistance Policy, the Self-Pay Billing and Collection Policy, the Financial Assistance Application, and/or the Plain Language Summary in person at the following locations:

   a. Gundersen Moundview Hospital and Clinics  
      402 West Lake Street, Friendship, WI  
      Emergency Department – Hospital Main Floor  
      Patient Registration – Hospital Main Floor  
      Patient Financial Services – Hospital Ground Level  
      (608) 339-8466

   b. Gundersen Moundview Hospital and Clinics  
      Westfield Clinic  
      Frontier Square Mini Mall  
      207 North Pioneer Park Road, Westfield, WI  
      (608) 296-6350