

Logan Health - Whitefish will give a reasonable dollar amount of its services without charge to eligible persons who cannot afford to pay for care. All Medically Necessary services will qualify for financial assistance consideration, including any hospital-owned physician services received at Logan Health - Whitefish or off-site locations.

To be eligible to receive Financial Assistance, your household income must be at or below 400% the Federal Poverty Income Guidelines. Federal Poverty Guidelines can be found at <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>.

Discounts will be based on income and family / household size only. Family is defined as: a group of two people or more (one of whom is the householder) related by birth, marriage, or adoption and residing together; all such people (including related subfamily members) are considered as members of one family.

Household as defined consists all the persons who occupy a housing unit (house or apartment), whether they are related to each other or not. If a family and an unrelated individual, or two unrelated individuals, are living in the same housing unit, they would constitute two family units (see next definition), but only one household. Logan Health Whitefish will also accept non-related household members when calculating family size.

If you think you may be eligible for Financial Assistance, please contact the Business Office as soon as possible. The Business Office will instruct you as to the requirements that must be met prior to application. For your convenience you may also review and download the Financial Assistance Application online at www.logan.org.

I hereby acknowledge that I have received the Notice of Availability of Financial Assistance, and that it is my responsibility to contact the Business Office for further information. This is a notice only and will not be considered as a dated application for Financial Assistance.

Patient or Representative

Date/Time

Witness

Date/Time