

**Plain Language Summary**

**Financial Assistance at Western Wisconsin Health**

Western Wisconsin Health (WWH) offers financial assistance. Information on eligibility, how to apply, and how financial assistance is applied through our Community Care Program is fully described in our Community Care policy. To obtain free copies of the Community Care policy and an application form (online or by mail) or if you need help with the application process, please visit Western Wisconsin Health as follows:

**Website:** http://www.wwhealth.org

**Physical Location:** Western Wisconsin Health

 Patient Financial Services

 1100 Bergslien Street

Baldwin, WI 54002

**Phone:** 715-684-1563 (Patient Financial Services)

715-684-1565 (Billing Department)

715-684-1569 (Fax - Patient Financial Services)

**ELIGIBILITY:** Western Wisconsin Health calculates financial assistance based on patients’ household income compared to what’s called the Federal Poverty Line (FPL). Patients whose income and family size place them at or below 100% of the (FPL) will receive a 100% discount. Patients whose income and family size place above 100%; but not more than 300% above the (FPL), will receive a sliding-scale partial discount. Please refer to WWH’s Community Care policy for more information. If a patient has received emergency care at WWH and is eligible for financial assistance, WWH will not charge more than amounts generally billed to patients that have health insurance coverage.

**HOW TO APPLY:** To apply for financial assistance, patients must fill out an application form and return it to WWH in person, by mail or by fax using the contact information above. Patients will be asked to provide documentation verifying income (such as a federal income tax return) and information about current or potential health insurance coverage (such as Medicaid, Medicare, or private insurance). Patient Financial Services can be reached by phone at 715-684-1563. Please refer to WWH Community Care Policy for more information.

**TRANSLATIONS:** Translations of WWHs Financial Assistance Policy, application form, and plain language summary are available according to the communities served by Western Wisconsin Health. For free translated copies, please visit WWH’s website or request copies using the contact information above.