The Community Care Program was created to ensure that all members of the communities we serve are able to access medically necessary care, regardless of their ability to pay. Discounts offered under this program are made available without consideration of race, religion, gender, age, nationality, social or immigrant status, veteran status, marital status, handicap/disability, sexual orientation or age of account. All patients may apply for Community Care.

To Apply for Community Care
• Please visit our website at www.richlandhospital.com
• Stop in at The Richland Hospital, Muscoda Health Center or Spring Green Medical Center
• Call the Patient Accounting Department at (608) 647-6321
• Mail a request to:
The Richland Hospital, Inc.
Patient Accounting Department
333 E Second St
Richland Center, WI 53581

The Richland Hospital, Inc.
333 E. Second Street
Richland Center, WI 53581
www.richlandhospital.com
(608) 647-6321
(888) 467-7485 toll-free

Muscoda Health Center
A Division of The Richland Hospital
1075 N. Wisconsin Avenue
Muscoda, WI 53573
(608) 739-3113

Spring Green Medical Center
A Division of The Richland Hospital
150 E. Jefferson Street
Spring Green, WI 53588
(608) 588-7413

Patients that meet financial eligibility requirements can receive help with their bill via discounts offered under the Community Care Program.
What is covered by the Community Care Program?
Emergency Care or Urgent Care, services deemed Medically Necessary, where Medical-ly Necessary is defined to mean care that is non-elective and needed in order to prevent death or adverse effects to the patient’s health is covered. Non-medically necessary care will not be eligible for a discount under this policy. This will include services provided and billed by The Richland Hospital, Inc., Spring Green Medical Center, and Muscoda Health Center.

Who is eligible?
An individual or family may qualify for free or discounted care under the Community Care Program if their personal income falls below 300% of the Federal Poverty Guidelines as published annually in the Federal Register or if you have experienced a recent catastrophic health event or significant loss of income.

How can I get information on, apply for or get assistance with the Community Care Program?
The Community Care Program application, Community Care Program Policy and Placement for Collections Policy, including Spanish versions, can be obtained by:

- Requesting in person or writing to The Richland Hospital, Inc., Spring Green Medical Center or Muscoda Health Center
- Contacting The Richland Hospital, Inc., Patient Accounting Department at (608) 647-6321
- Accessing The Richland Hospital, Inc. website at www.richlandhospital.com

Individuals can apply for financial assistance by submitting a completed application and providing all required supporting documentation* in person or by mail to the Patient Accounting Department of The Richland Hospital, Inc., or by fax to (608) 647-6898.

*Required documentation is listed on the application and in the Community Care Program Policy.

How are charges determined?
Patients will be charged based on the Amount Generally Billed (AGB) which will equal amounts generally billed to individuals with insurance covering that care. AGB is determined by the sum of claim payments for healthcare covered by Medicare and private insurers divided by allowed charges related to claims.

What if I only qualify for a partial discount?
If a balance remains on the account after the community care discount is applied, patient will need to pay the balance is full or establish a written payment plan by calling the Patient Accounting Department of the hospital.

If I do not meet the qualifications for Community Care, can I still get help paying for my healthcare?
If you do not qualify for Community Care, you should contact the Patient Accounting Department of the Richland Hospital, Inc. at (608) 647-6321 for more information on other payment options such as a payment plan.

How can I make a payment on my account?
Your bill may be paid via mail, by phone or in person. We accept:

- Check
- Money Order
- Cash
- Charge or Debit Card

What happens if I don’t pay the remaining balance or fail to complete the application process?
If the application process is not completed, the patient does not pay the remaining balance in full, or the patient does not fulfill the requirements of an established payment plan, the account will be processed according to our Placement for Collection Policy which could include referral to an outside collection agency and extraordinary collection actions may occur. For more information, please request a copy of the hospital’s Placement for Collections Policy.