

Community Care Program



What is covered by the Community Care Program?

Emergency Care or Urgent Care, services deemed medically necessary, where medically 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, Muscoda Health Center, and Richland Hospital Clinic.

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, Muscoda Health Center, or Richland Hospital Clinic
- Contacting The Richland Hospital and Clinics, Patient Financial Services at 608.647.6321 ext. 2226
- Accessing The Richland Hospital and Clinics website at 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 Financial Services Department of The Richland Hospital and Clinics, or by fax to 608.647.6898.

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

For assistance by phone or to make an appointment for in-person assistance, call 608.647.6321 ext. 2226 to speak with a Patient Financial Services Department financial counselor.

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 in full or establish a written payment plan by calling Patient Financial Services at 608.647.6321.

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 Patient Financial Services 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.

For questions, please call 608.647.6321



**THE RICHLAND HOSPITAL
and Clinics**

333 East Second Street
Richland Center, WI 53581
608.647.6321
888.467.7485 toll-free

Connect
with us on:     

Richland Hospital Clinic
608.647.6161

Muscoda Health Center
608.739.3113

Spring Green Medical Center
608.588.7413

The Richland Hospital, Inc. complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1.608.647.6321

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1.608.647.6321.

Community Care Financial Assistance



**THE RICHLAND HOSPITAL
and Clinics**

RichlandHospital.com

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 RichlandHospital.com
- Stop in at The Richland Hospital, Inc., Muscoda Health Center, Spring Green Medical Center, or Richland Hospital Clinic
- Call the Patient Financial Services Department at 608.647.6321 ext. 2226
- Mail a request to:
The Richland Hospital and Clinics
Patient Financial Services
333 E Second St
Richland Center, WI 53581