

Financial Assistance Policy Summary

Margaret Mary Health (MMH) is committed to offering financial assistance to individuals who have health care needs and are not able to pay for emergency or other medically necessary care. MMH strives to make sure the financial resources of individuals who need health care services does not prevent them from seeking or receiving care.

Availability of Financial Assistance

You may be able to get financial assistance if any of the following pertain to your current situation:

- Either not insured or underinsured
- Not eligible for a government program or governmental assistance (example: Medicare or Medicaid)
- Expected out of pocket expenses related to services provided create a significant financial hardship

Eligibility Requirements

Financial assistance is generally determined by a sliding scale of total household income based on the current Federal Poverty guidelines. If you and/or the responsible party's income combined is at or below 300% of the federal poverty guidelines and the patient resides within the MMH service area, you may receive discounted rates for the services provided. No person eligible for financial assistance under the Financial Assistance Policy will be charged more for emergency or other medically necessary care than amounts generally billed to individuals who have insurance covering such care. If you have sufficient insurance coverage or assets available to pay for your care, you may not be eligible for financial assistance.

Where to Find Information

There are many ways to find information regarding the Financial Assistance application process. The Financial Assistance Policy and Financial Assistance application form are available through the following:

- Download the information online at www.mmhealth.org, under Financial Resources
- Request the information in writing or by mail from the Patient Resource Advocate at the address listed below
- Request the information by calling the Patient Resource Advocate at 812.933.5620
- Schedule an appointment with the Patient Resource Advocate to review options and complete the Financial Assistance application, if appropriate

Availability of Translations

MMH will provide assistance through the use of a qualified bilingual interpreter upon request. For information about MMH's Financial Assistance Program and translation services, please call for a representative at 812.933.5620.

How to Apply

The application process involves filling out the financial assistance application and submitting the application, along with the supporting documents to MMH for processing. Financial assistance applications are to be submitted to the following office:

Patient Resource Advocate
C/O Margaret Mary Health
PO BOX 226
321 Mitchell Avenue
Batesville, Indiana 47006

