

Financial Assistance Application Form Instruction

Santiam Hospital understands that medical bills can be unexpected and may be difficult to pay. In order to assist with this burden Santiam Hospital offers financial assistance to our patients that meet certain income requirements. Based on those requirements an individual or family may qualify for a reduction in the cost of services partially or in full, even if you have health insurance.

What does it cover? Financial Assistance covers services at Santiam Hospital as well as any of our affiliated clinics for medically necessary services based on an individual's eligibility. Financial assistance may not cover any additional costs incurred or provided by other organizations.

How do I apply? To apply for financial assistance complete and return the enclosed form by mail to Santiam Hospital Financial Counselor, Po Box 577 Stayton, OR 97383, by fax to 503-769-3472 or by email to patientaccounts@santiamhospital.org. If you have questions or need assistance in filling out this application, please call our financial assistance specialist at 503-769-4572.

What information is needed to apply?

- The enclosed application form (signed and dated)
- Proof of income
- Copy of recent tax return
- Complete and current bank statement
- Include a letter explaining your current situation and additional need for assistance.

When will I know the outcome of my application? You will receive a determination letter in the mail within 21 days after receiving your completed application. If additional information or documentation is required to process the financial assistance application, you will be informed of those requirements.

Please submit your application promptly.

You will continue to receive bills until we receive your information and an eligibility determination has been made.