River Care Sliding Fee Discount Application

River Hospital

Sliding Fee Discount Information

It is the policy of River Hospital, Inc. to provide essential services regardless of the patient's ability to pay. River Hospital offers discounts based on household size and annual income.

Please complete the following information and return to the billing office to determine if you or members of your family are eligible for a discount.

The discount will apply to all services received at this facility, but not those services or equipment purchased from outside, including reference laboratory testing, drugs, and x-ray interpretation by a consulting radiologist, and other such services. You must complete this form every 12 months or if your financial situation changes

NAME OF HEAD O	ME OF HEAD OF HOUSEHOLD		PLACE OF EMPLOYMENT		
TREET CITY		STATE ZIP		PHONE	
lease list all r	Date of Birth	sehold Name		Date of Birth	
SELF					

NOTE: Copies of tax returns, pay stubs, or other information verifying income is <u>REQUIRED</u> to process application.

Source	Self	Other	Other	Total
Gross wages, salaries,				
tips, etc.				
Income from business,				
self-employment, and				
dependents				
Unemployment, workers'				
compensation, Social				
Security, Supplemental				
Social Security, public				
assistance, veterans'				
payments, survivor				
benefits, pension or				
retirement income				
Interest, dividends, rents,				
royalties, income from				
estates, trusts, <u>educa-</u>				
tional assistance,				
alimony, child support,				
assistance from outside				
the household, and other				
miscellaneous sources.				
Total Income				

I certify that the family size and income information shown above is correct.

Name (Print)	
Signature	Date
-	Office Use Only
atient Name:	
pproved Discount:	
pproved by:	
Date Approved:	

Verification Checklist	Yes	No
Identification/Address: Driver's license, utility bill, employment ID, or other		
Income: Prior year tax return, three most recent pay stubs, or other		
Insurance: Insurance Cards		