

**ECM/Shoals Hospital
Notice of Availability of Charity Care/Financial Assistance**

As a community service, ECM/Shoals Hospital will give a reasonable amount of its services without charge or at a reduced charge to eligible persons who cannot afford to pay for care.

To be eligible for Charity Care/Financial Assistance, your family income must be at or below the following levels:

Size of Family	Without Charge Poverty Guidelines
1	16,755.00
2	22,695.00
3	28,785.00
4	34,575.00
5	40,515.00
6	46,455.00
7	52,395.00
8	58,335.00

Your bill may also be reduced if your income is above these levels, but meet certain guidelines.

For each additional family member add \$5,940.00
Maximum liability for anyone who qualifies will be 20% of income.
Based on 150% of the 2009 Federal Poverty Guidelines

If you think you may be eligible for ECM/Shoals Hospital Charity Care/Financial Assistance, you may complete the charity application. If you need assistance with this, please call 256-768-8344.

ECM/Shoals Hospital will make a written conditional or final determination of your eligibility for charity inpatient and outpatient services within 30 working days of your request.