

McLaren Print System Order

Order No: 59839 Reprint Previous Order No: 22843
Order Date: 2021-01-25
User: Hannah Howard
Phone: 231 487-2391

Ship Location: McLaren Northern -Burns Professional Building, Suite 560
560 West Mitchell Street, Suite 560
Petoskey, MI 49770

Forms

Quantity: 100
Paragon Dept No: 53548
Dept Name: McLaren Northern Michigan Orthopedic Services
Company Number: 810

Order Total Price: 12.80

Item Number: MHCC-542-A
Item Description: Financial Assistance Application Instruction Packet
Revision Date: 9/2020
Print: 1 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish: None
Drill: None
Misc Info: ss; color or black; 4 pages



Financial Assistance Application Instructions

We will provide Financial Assistance for Medically Necessary services for patients who qualify.

Qualification for financial assistance will be based on the Federal Poverty Guidelines (published annually in the Federal Register). Patients who indicate that they do not have insurance or any other means of paying for medically necessary services may request consideration for Financial Assistance.

PLEASE RETURN THE FOLLOWING DOCUMENTS:

- COMPLETED FINANCIAL ASSISTANCE APPLICATION (incomplete ones will not be considered)
- PROOF OF HOUSEHOLD INCOME (LAST 4 CHECK STUBS AND 1 BANK STATEMENT OR OTHER PROOF OF INCOME)
- INCOME VERIFICATION FORM (IF YOU CURRENTLY DO NOT HAVE ANY INCOME)
- COPIES OF LAST FILED FEDERAL TAX RETURN
- PLEASE NOTE IF ANY DOCUMENTATION IS UNATTAINABLE

McLaren Health Care may request additional financial documents necessary to process the Financial Assistance Application.

PLEASE RETURN THE COMPLETED APPLICATION AND SUPPORTING DOCUMENTS WITHIN FOURTEEN (14) DAYS TO:

McLaren Corporate Services
Attn: Revenue Cycle Operations - Customer Service
50020 Schwaner Rd.
Shelby Township, MI 48315
OR FinancialAssistance@mcclaren.org

All requested information must be returned in order to be processed/reviewed for Financial Assistance.
If you have any questions or need any assistance with completing the application please contact:

Patient Financial Services
Customer Services Department
(844) 320-1577