

SVMC Financial Assistance Program Plain Language Summary

Southwestern Vermont Medical Center's Financial Assistance Program offers discounted or free care to uninsured or underinsured individuals who are in need of emergency or medically necessary services. SVMC will render financial assistance to persons with a demonstrated inability to pay regardless of race, color, gender, immigration status, sexual orientation or religious affiliation. A patient determined to be eligible for Financial Assistance will not be billed more for emergency or medically necessary services than the amounts generally billed to insurance companies.

Eligibility Requirements

- Patients household income/assets do not exceed 400% of the Federal Poverty level guidelines
 - Income is calculated at gross earnings per month
 - Assets include cash, savings, checking, CDs, Stocks/bonds and secondary homes
 - Patient's primary residence is not considered in determining eligibility
- The patient has no medical insurance, liability or other third party coverage that will pay for the services
- Uninsured patients are required to apply for Medicaid or insurance through the Health Exchange
- Patients must reside within the SVMC service area unless care was a medical emergency. The SVMC service area includes: Bennington (VT), Windham (VT), Rensselaer (NY), Washington (NY), and Berkshire (MA) counties where SVMC is the closest hospital to the patient's home or place of work.
- Services must be Medically necessary

How to Apply

- Submit a completed Financial Assistance Application along with all of the required supporting documents to:
Southwestern Vermont Medical Center
100 Hospital Drive, Box 52
Bennington, VT 05201
- A written notification of eligibility will be sent to the patient.
- Eligibility is determined based on a calculation of patient's income and assets. Financial Assistance adjustments will be made to all eligible service dates where patients below 225% of the Federal Poverty Limit (FPL) will receive 100% discount, patients between 226%-300% will receive 75% discount and patients between 301%-400% will receive 65% discount.

Where to obtain copies of the Financial Assistance Application

- The SVMC Financial Assistance Policy and Application can be downloaded from our website:
<http://svhealthcare.org/patients-visitors/billing-insurance/>
- An application may be obtained from any registration desk at the hospital, at any SVMC physician practice or at the SVMC Billing office.
- An application may be requested by phone by calling the billing department at 802-447-4500

Contact Us

For more information about the Financial Assistance Program:

- Contact the SVMC Billing Department at 802-447-4500
- Contact the SVMC Financial Counselor at 802-440-4083
- To speak to someone in person, please feel free to visit the SVMC Billing Department at:
100 Hospital Drive (1st Floor, East Wing)
Bennington, VT 05201
- Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-367-9559
- TTY: 1-866-237-0174, option 1 then client code 05201.