

INTERMOUNTAIN HEALTHCARE OFFERS A FINANCIAL ASSISTANCE PROGRAM for medical care provided in Intermountain clinics and hospitals for residents of Intermountain's service area. The program is for most medical care that a medical provider decides is needed. Intermountain's Financial Assistance Program only applies to bills with Intermountain Healthcare hospital, clinics, and some healthcare providers employed by Intermountain.

- Financial assistance is determined on income and the amount of your medical bills.
- People eligible for financial assistance will not be charged more for emergency or other medically necessary care than the amounts generally billed to insured people.

AMOUNTS GENERALLY BILLED (AGB) – The amounts generally billed for emergency or other medically necessary care to individuals who have insurance covering such care. Information regarding AGB percentages and calculations may be obtained in writing and free of charge by sending a request to financial.assistance@r1rcm.com or by writing to Financial Assistance, P.O. Box 30193, Salt Lake City, UT 84130. AGB is calculated using the “Look Back Method” in accordance with 501R federal regulations.

HOW DO I APPLY?

Apply **online** at www.intermountainhealthcare.org/assistance

If you received (or plan to receive) medical care in an Intermountain **hospital**, call 800.705.9175

If you received (or plan to receive) medical care in an Intermountain **clinic**, call 800.748.4248

If you are interested in **payment options**, please call 866.415.6556

To apply for Financial Assistance in person, visit your local hospital or clinic where you receive services.

When those who live in our communities need care, financial concerns should not prevent them from receiving treatment. Intermountain Healthcare is committed to providing medically necessary care by offering financial assistance to individuals that qualify.

