

Financial Assistance

Financial Assistance is available at Salem Township Hospital to eligible patients. A person's eligibility for Financial Assistance is based on a scale established by the Hospital. Eligibility requirements are based upon Federal Poverty Guidelines (FPG) published by the Federal Government according to the applicant's family size and family income. The Hospital also complies with the requirements under the Uninsured Patient Discount Act.

If your income exceeds these financial guidelines and you believe you are unable to pay your account or have unusual or extenuating circumstances, please submit a completed application with necessary documentation and your eligibility will be reviewed. Financial assistance granted by other organizations may be taken into consideration as well.

The Hospital requires a completed Financial Assistance Application and the following documents:

- Most recent tax return
- Last 3 months proof of income (check stubs or a statement from employer are acceptable)
- Additional information such as bank and investment statements may be requested to finalize your application.

If you are potentially eligible for Medicaid, we must have a copy of your approval or denial from Illinois department of Human Services. Our Financial Counselors can assist you with your Medicaid application.

Contact our Financial Counselors at (618) 548-3194 Extension 8212 for additional information on this program or to request an application.