

SALEM COMMUNITY HOSPITAL

Payment Arrangements

The Hospital acknowledges that there will be instances where self-pay patients may be unable to make payment in full immediately, and will therefore request to make payments until their balance is satisfied. Following are the guidelines under which payment arrangements will be accepted:

1. The table below recommends minimum payment amounts. The Patient Financial Advocate has discretion to accept lower amounts based on the patient's financial circumstances.
2. If a patient has a current payment arrangement and wishes to consolidate other (new) accounts, the monthly payment may be revised to recognize the new total balance due.
3. All accounts accepted for payment plan status extending for a term greater than six months, must be turned over to the Hospital's monitoring service vendor.

<u>Initial Balance</u>	<u>Minimum Monthly Payment</u>
Under \$250	\$25.00
\$251-\$500	\$30.00
\$501-\$1,000	\$40.00
\$1,001-\$2,000	\$50.00
\$2,001-\$3,000	\$100.00
\$5,001 plus	To be determined by Hospital Administration

Effective: 4/04

Revised: 10/06; 10/07