



Cheyenne Regional Medical Center

214 East 23rd Street • Cheyenne, WY 82001
307-634-2273 • www.crmcwy.org

Patient Name:	
Accounts:	
Due Date:	

To assist our family and friends in time of need, Cheyenne Regional Medical Center offers a Charity Care Program to help individuals when they can't afford the health care they need.

Anyone may apply for the **Community Benefit** charity program, but please keep in mind that our goal is to try to help the people who need it most, primarily individuals with low or no income, the disabled, and those with catastrophic illnesses.

In evaluating each application, Cheyenne Regional Medical Center will consider all assets, as well as all debts.

A comparison is then made of income to the **Federal Register Poverty Guidelines**. The finance committee, which meets on a monthly basis to review **Community Benefit** applications, then makes a recommendation to the Cheyenne Regional Medical Center board of Trustees.

Applications must contain the most recent federal income tax return and most recent employee check stubs. Applicants for **Community Benefit** will be notified by mail of the board's decision. **It is important for you to know that throughout this process, individuals applying for Community Benefit will be required to pay on their accounts.**

Applications for the **Community Benefit** charity program will be accepted by the Community Benefit Coordinator, or any hospital cashier. If you have any questions concerning your application you can call the **Community Benefit Coordinator at (307) 633-3037.**

If you do not qualify for **Community Benefit** our patient account representatives will be able to assist you with financial arrangements.

Upon returning your **Community Benefit** application, please send us your completed application and a **COPY** of each of the following that pertains for each household member.

- Complete copy of your most recent complete Federal Income Tax Return
- Copies of three (3) most recent, consecutive paycheck stubs or a statement from the employer
- Copies of the three (3) most recent bank statements (e.g. savings, checking, money market, IRA)
- Copies of unemployment or disability compensation benefits statements
- Copies of pension benefits stubs
- Copies of Social Security income (yearly benefits statements)
- Copy of Food Stamp allocation
- Copies of government assistance notices (including Department of Health & Human Services)
- Copy of home/property **Assessment Schedule**

Please remember that **ALL HOUSEHOLD** information must be reported.

Failure to provide this information may result in automatic "Community Benefit" denial.