



## MEDICAL CARE FOR THOSE WHO MAY QUALIFY FOR FINANCIAL ASSISTANCE

In accordance with Chapter 150, Section 1 Hospital Finance Rules, Cary Medical Center will provide **Free Care** to residents of the State of Maine whose income falls below the following guidelines:

Federal Guidelines	Family Size	Percentage of Poverty		
		0-190%	191-200%	201-210%
		100% write off	75% write off	50% write off
\$13,590	1	\$25,821	\$27,180	\$28,539
\$18,310	2	\$34,789	\$36,620	\$38,451
\$23,030	3	\$43,757	\$46,060	\$48,363
\$27,750	4	\$52,725	\$55,500	\$58,275
\$32,470	5	\$61,693	\$64,940	\$68,187
\$37,190	6	\$70,661	\$74,380	\$78,099
\$41,910	7	\$79,629	\$83,820	\$88,011
\$46,630	8	\$88,597	\$93,260	\$97,923

*For family units larger than 8, add \$4,720 per year for each additional person*

If you believe you qualify for Free Care, please contact:

Financial Counselors' Office, Phone: (207) 498-1617

(800) 858-2279 ext. 1617

Email address: [billinghelp@carymed.org](mailto:billinghelp@carymed.org)

Before providing financial assistance, the hospital will ask for information about your income and ask you to show verification that insurance or government medical assistance programs will not pay for your care.

Only services that are medically necessary are provided within our Financial Assistance Program.

Individuals can access our application on our website, [www.carymedicalcenter.org](http://www.carymedicalcenter.org), or by visiting our financial counselors' office:

24 Sweden Street, Suite 101  
Caribou, ME 04736

If you disagree with the determination, you may ask for a fair hearing. We can explain how to apply for a fair hearing.

The above income guidelines are effective February 14, 2022.