



Patient Financial Assistance

Do you need help paying your medical bill?

Bellin has a program designed to help those in need.

Who Can Apply – All patients can apply for assistance. Contact us for available options. We can determine if you qualify for free or reduced services after the application is completed.

Income % of Poverty Guidelines	% of Financial Assistance	Income % of Poverty Guidelines	% of Financial Assistance
0-220%	100%	301-320%	50%
221-240%	90%	321-340%	40%
241-260%	80%	341-360%	30%
261-280%	70%	361-380%	20%
281-300%	60%	381-400%	10%

We can help patients who don't have health insurance. Contact us for information on coverage options and help completing paperwork, including Medicaid, Medicare, and disability forms.

How to Apply – Applications are available:

1. Online at bellin.org
Patients/Visitors > Patient Information > Financial Assistance
2. By calling 1-800-858-3787
3. At any Bellin location

Complete a Bellin Financial Assistance Application and return it to:

Bellin Health Administrative Office
2020 S. Webster Avenue
Green Bay, WI 54301

To refill this holder, please order 10-4227 from Bellin Health Copy Center.