

**SMP Health – St. Andrew’s
Caring Program Could Help You Save Up To 100% On Your Bill**

The Caring Program may assist you financially with your bills at our facilities if you meet federal guidelines.

Please fill in the front and back of the first sheet and sign your name(s) where indicated at the bottom of the back page. Please attach a copy of your most current Federal Income Tax form. Per Federal guidelines, if you did not file income taxes, please fill out the 4506-T Request for Transcript of Tax Return form and sign your name(s) at the bottom as indicated. Please include proof of Medicaid denial and Medicaid Expansion denial.

Please mail requested information with the application form to Maggie at SMP Health – St Andrew’s. Please call Maggie at 701-228-9385 or come to the hospital business office if you have any questions. Thank you.

SMP Health – St. Andrew’s

Policy and Procedure

Caring (Charity) Program

2022 HHS Poverty Guidelines

(Effective 1-20-2022)

Poverty Level	100%	125%	150%	175%	200%	>200%
Family Size	0% pay	20% pay	40% pay	60% pay	80% pay	100% pay
1	13,590	16,988	20,385	23,783	27,180	27,181
2	18,310	22,888	27,465	32,043	36,620	26,621
3	23,030	28,788	34,545	40,303	46,060	46,061
4	27,750	34,688	41,625	48,563	55,500	55,501
5	32,470	40,588	48,705	56,823	64,940	64,941
6	37,190	46,488	55,785	65,083	74,380	74,381
7	41,910	52,388	62,865	73,343	83,820	83,821
8	46,630	58,288	69,945	81,603	93,260	93,261

***** More than eight (8) members in the family, add \$4,540 for each additional person**

SOURCE: aspe.hhs.gov; updated 1/20/2022