

TITLE: FINANCIAL ASSISTANCE / UNINSURED DISCOUNT POLICY

POLICY OBJECTIVE

To ensure that Tuality Healthcare meets its community obligations to provide financial assistance in a fair, consistent, and objective manner.

POLICY STATEMENT

- I. It is both the philosophy and practice of Tuality Healthcare that medically necessary health care services should be available to all individuals, regardless of their ability to pay.
- II. Based on eligibility, Tuality Healthcare assists persons with financial need by providing discounts or by waiving all or part of the charges for services provided by Tuality Healthcare.
- III. The provision of health care services should never be delayed pending an assistance eligibility determination.
- IV. Definitions:
 - A. **Financial Assistance:** Financial Assistance is defined as the forgiveness of charges on an account for Medical Necessary services provided to patients who are unable to pay based on income level, financial analysis or demographic indicators.
 - B. **Medically Necessary Services:** “Medically Necessary” refers to inpatient or outpatient health care services provided by a Tuality hospital for the purpose of evaluation, diagnosis and/or treatment of an injury, illness, disease or its symptoms which otherwise if left untreated would pose a threat to the patient’s ongoing health status; services must be clinically appropriate and within generally accepted medical practice standards; represent the most appropriate and cost effective supply, device or service that can be safely provided and readily available at Tuality hospital, with a primary purpose other than patient or providers’ convenience. Excluded from Medical Necessary are healthcare services that are cosmetic, experimental or part of a clinical research program.
 - C. **Primary Service Area:** Zip codes from which the hospital derives approximately 90% of it’s business.
 - D. **Household Income:** All pre-tax income, however derived, of all persons 18 years old and over who reside in a household.
 - E. **Household Assets:** All cash or non-cash assets owned by a member of a household that can be converted to cash including:
 1. Cash held in savings accounts and checking accounts

2. Equity in real estate other than the primary residence.
 3. Cash value of stocks, bonds, treasury bills, certificates of deposit and money market accounts. This includes Retirement Accounts.
 4. Vehicles other than an automobile of reasonable value used as the primary source of transportation
 5. Lump sum or one-time receipts of funds, such as inheritance, lottery winnings, insurance settlements.
- F. Qualified Assets: The amount determined by calculating one-quarter of the amount that remains after \$75,000 is deducted from the total value of a patient's Household Assets. Thus Qualified Assets = (Household Assets - \$75,000) x 0.25.

PROCEDURE

I. ELIGIBILITY CRITERIA

- A. Financial counselors and Business Office personnel are available by phone at 503-681-1000 to help patients identify appropriate financial options or assistance programs.
- B. Financial assistance is generally secondary to all other financial resources available to the patient, including insurance, government programs, third-party liability, and assets.
- C. Full financial assistance usually will be provided to a responsible party with gross family income at or below 200% of Federal Poverty Guidelines (FPG). A sliding discount will be provided up to 400% of FPG.
- D. Notification of financial assistance determinations will be mailed to the responsible party. Reasonable payment arrangements consistent with the responsible party's ability to pay will be extended for amounts owed.

II. ELIGIBILITY DETERMINATIONS

- A. Requests for financial assistance may be made at any point before, during, or after the provision of care.
- B. Financial assistance requests may be proposed by sources other than the patient, such as the patient's physician, family members, community or religious groups, social services, or hospital personnel.
- C. Anyone wishing to make application for financial assistance with Tuality Healthcare will be given a Financial Assistance Application, which includes instructions on how to apply.

- D. Consideration for financial assistance will occur once the applicant supplies a completed Financial Assistance Application with supporting documents to the Tuality Healthcare Business Office.
- E. Tuality Healthcare will make every attempt to make assistance determinations within 60 days of receiving a completed Financial Assistance Application.
- F. Consideration for assistance includes a review of the responsible party's annual household income, number of people in the home, assets, credit history, existing debt and other indicators of the party's ability to pay. *These are merely guidelines; each individual situation should be reviewed independently. Allowances may be made for extenuating circumstances.*
- G. *Other catastrophic circumstances may be considered in the Financial Assistance decision including, residency, bankruptcy history, medical (catastrophic event/diagnosis)*
- H. Acceptable verification of income includes the following: the most current 90 days' worth of payroll stubs; a copy of the most current year's IRS tax return; verification of Social Security or unemployment benefits. In the absence of income, a letter of support from individuals providing for the patient's basic living needs will be accepted. Tuality may require additional verification of income and assets.
- I. Tuality Healthcare will keep all applications and supporting documentation confidential. Tuality Healthcare may, at its own expense, request a credit report to further verify the information on the application. .
- J. Financial assistance may be denied if application is not completed and returned to Tuality Healthcare within 30 days of receipt by the responsible party.
- K. Financial assistance will not be considered without a completed Financial Assistance Application unless sufficient like information can be obtained that allows for a final determination without an application. In extenuating circumstances, where it can otherwise identify that a financial hardship exists; Tuality Healthcare may offer financial assistance at its own determination.
- L. Financial assistance is not granted for some procedures, such as elective cosmetic surgery or some special situations, including an instance of when an individual who is eligible for insurance but has refused to apply. A Business Office financial counselor should be consulted in these special situations.
- M. For non emergent situations, patients must reside in the State of Oregon and live within Tuality Healthcare primary service area for six months to be eligible for financial assistance consideration. Individuals residing in the United States on a student or temporary VISA are not considered residents of the State of Oregon. Financial assistance may be provided for out of area patients that have an ongoing existing relationship established before the policy changed in August 2009. The services allowed are for continuity of care of routine ongoing illnesses and not for inpatient or outpatient elective services.

- N. Financial assistance may be granted in the absence of a completed application in situations where the patient does not apply but other available information substantiates a financial hardship that would make the debt virtually uncollectible.
- O. Tuality Healthcare and collection agencies will not provide assistance after an account has entered legal court proceedings.

III. APPEALS

Responsible parties may appeal a financial assistance determination by providing additional information, such as income verification or an explanation of extenuating circumstances, to the Business Office director within 30 days of receiving notification. The Director, Patient Administration Support will review all appeals. The responsible party will be notified of the appeals outcome. Collection follow-up on accounts will be pended during the appeal process.

IV. DISCOUNTS FOR UNINSURED PATIENTS

- A. Tuality provides discounted charges to patients who do not have health insurance coverage. This discount lowers the amount owed by 10 to 50 percent based on the patients account balance.
- B. The discount scale was established by calculating the average commercial insurance contract rate with Tuality Healthcare.

Attachment A: Document Reminders

Administrator/COO

Chief Financial Officer

Director, Medical Office Services

Director, Patient Administration Support

Formulated:	May, 2001
Reviewed:	
Revised:	March, 2004 October, 2004 March, 2005 May, 2006 November, 2008 August , 2009 July, 2010 January, 2011

Attachment A

 **DOCUMENTATION REMINDERS** 

- Patient Accounting Financial Assistance Form, English (56-0178-6)
- Patient Accounting Financial Assistance Form, Spanish (56-0179-4)
- Physicians' Billing Office Financial Assistance Form, English (56-0185-1)
- Physicians' Billing Office Financial Assistance Form, Spanish (56-0187-7)
- Sliding Fee Schedule