Status Active Fo				
HARRIS REGIONAL HOSPITAL	Origination	01/2018	Owner	Anita Johnson: Operations Manager for the Harris and Swain Clinic
	Last Approved	03/2024		
	Effective	03/2024	Policy Area	
	Last Revised	03/2024		Central Billing
	Next Review	03/2025		Office
	SWAIN COMMUNITY HOSPITAL		Applicability	Harris Regional Hospital Swain Community Hospital
			References	Discount, Financial Assistance, NHSC + 2 more
Slie	ding Fee Discount	Program (NHSC Site	es)

PURPOSE:

Status (Active) PolicyStat ID (15273178)

This program is designed to provide free or discounted care to those who have no means, or limited means, to pay for their medical services (uninsured or underinsured). In addition to quality healthcare, patients are entitled to financial counseling by someone who can understand and offer possible solutions for those that cannot pay in full. Our Practice Managers, Front Office staff, and Central Billing Office staff, can work with a patient and/or their guarantor to find available financial assistance options, including our Sliding Fee Discount Program. Western Carolina Physician Practices approved NHSC sites will offer a Sliding Fee Discount Program to all patients who are unable to pay for their services at NHSC approved operating sites. The Sliding Fee Discount Program eligibility will be based on a person's inability to pay for services and will not discriminate on the basis of age, gender, race, creed, disability, or national origin. The Federal Poverty Guidelines, <u>https://aspe.hhs.gov/poverty-guidelines</u>, are used in creating and annually updating the Sliding Fee Schedule (SFS) to determine eligibility.

POLICY:

To make available free or discounted services to those in need.

DEFINITION:

WCPP: Western Carolina Physician Practices, LLC

NHSC Sites (utilizing Sliding Fee Discount Program; list below includes respective satellite clinics):

- Harris Pediatric Care
- Harris Women's Care
- Swain Family Care
- Harris Medical Associates and Harris Family Care Franklin (not active NHSC sites but approved to use sliding fee discount program as they continue to work on NHSC site recertification).

PROCEDURE:

The following guidelines are to be followed in providing the Sliding Fee Discount Program:

- 1. Notification: WCPP NHSC sites will notify patients of the Sliding Fee Discount Program by:
 - Notification of the Sliding Fee Discount Program will be offered prior to or during a patient's initial visit, for those that have no means, or limited means, to pay for their medical services (uninsured or underinsured).
 - Signage notifying patients of the Sliding Fee Discount Program will be visible in the clinic waiting area and/or common areas.
 - An explanation of our Sliding Fee Discount Program and our application form are available on each practice website.

2. All patients seeking healthcare services at WCPP NHSC sites are assured that they will be served regardless of their ability to pay. No one is refused service because of a lack of financial means to pay.

3. Requests for discounted services may be made by patients, family members, social services staff or others who are aware of existing financial hardship. The Sliding Fee Discount Program will only be made available for clinic visits at the WCPP NHSC sites. Information and application forms can be obtained from Practice Front Desk staff or staff at our Central Billing Office.

4. Administration: The Sliding Fee Discount Program procedure will be administered through the Central Billing Office Director and/or his/her designee. Information about the Sliding Fee Discount Program policy and procedure will be provided and assistance offered from completion of the application. Dignity and confidentiality will be respected for all who seek and/or are provided charitable services.

5. Alternative payment sources: All alternative payment resources must be exhausted, including all thirdparty payment from insurance(s), Federal and State programs.

6. Completion of the Application: The patient/responsible party must complete the Sliding Fee Discount

Program application in its entirety. By signing the Sliding Fee Discount Program application, persons authorize WCPP access in confirming income as disclosed on the application form. Providing false information on a Sliding Fee Discount Program application will result in all Sliding Fee Discount Program discounts being revoked and the full balance of the account(s) restored and payable immediately.

If an application is unable to be processed due to the need for additional information, the applicant has two weeks from the date of the notification to supply the necessary information without having the date on their application adjusted. If a patient does not provide the requested information within the two week time period, their application will be re-dated to the date on which they supply the requested information. Any accounts turned over for collections as a result of the patient's delay in providing information requested will not be considered for the Sliding Fee Discount Program.

7. Eligibility: Discounts are based on income and family size only. WCPP uses the Census Bureau definitions of each.

a. Family is defined as: a group or two people or more (one of whom is the householder) related by birth, marriage, or adoption and residing together; all such people (including related subfamily members) are considered members of one family.

b. Income includes monies received from wages, salary, commissions, bonuses, and tips; selfemployment income from own non-farm or farm businesses, including proprietorships and partnerships; interest, dividends, net rental income, royalty income, or income from estates and trusts; Social Security or Railroad Retirement income; Supplemental Security Income (SSI); any cash public assistance or welfare payments from the state or local welfare office; retirement, survivor, or disability benefits; and any other sources of income received regularly such as Veterans' (VA) payments, unemployment and/or worker's compensation, child support, and alimony. Non-cash benefits (such as food stamps and housing subsidies) do not count.

8. Income verification: Applicants must provide one of the following: prior year W-2; two most recent pay stubs, letter from employer, or Form 4506-T (if W-2 not filed). Two forms of identification with address is also required (state issued photo ID, utility/telephone bill, etc.) Self-employed individuals will be required to submit detail of the most recent three months of income and expenses for the business. Adequate information must be made available to determine eligibility for the program. Self-declaration of income may only be used in special circumstances. Specific examples include participants who are homeless. Patients who are unable to provide written verification must provide a signed statement of income, stating the reason why he/she is unable to provide independent verification. This statement will be presented to the CFO or his/her designee for review and final determination as to the sliding fee discount percentage. Self-declared patients will be responsible for 100% of their charges until management determines the appropriate category.

9. Discounts: Those with incomes at or below 100% of poverty will receive a full 100% discount. Those with incomes above 100% of poverty, but at or below 200% of poverty, will be charged according to the attached sliding fee discount schedule. The sliding fee discount schedule will be updated during the first quarter of every calendar year with the latest federal poverty guideline, <u>https://aspe.hhs.gov/poverty-guidelines</u>.

Sliding Fee Discount Scale:

	Family Income as a Percent of 2024 Federal Poverty Guidelines	Less than or equal to 200% (at or below 100% - 200%)	201% - 225%	226% - 250%	251% - 275%	276% - 300%
	Discount Applied	100% Discount	[90%] Discount	[80%] Discount	[70%] Discount	[60%] Discount
Family Size	Poverty Level					
1	\$15,060	\$30,120	\$33,885	\$37,650	\$41,415	\$45,180
2	\$20,440	\$40,880	\$45,990	\$51,100	\$56,210	\$61,320
3	\$25,820	\$51,640	\$58,095	\$64,550	\$71,005	\$77,460
4	\$31,200	\$62,400	\$70,200	\$78,000	\$85,800	\$93,600
5	\$36,580	\$73,160	\$82,305	\$91,450	\$100,595	\$109,740
6	\$41,960	\$83,920	\$94,410	\$104,900	\$115,390	\$125,880
7	\$47,340	\$94,680	\$106,515	\$118,350	\$130,185	\$142,020
8	\$52,720	\$105,440	\$118,620	\$131,800	\$144,980	\$158,160
Over 8	Add additional 5,380 per person					

10. Waiving of charges: In certain situations, patients may not be able to pay the discounted fee. Waiving of charges may only be used in special circumstances and must be approved by the CFO, or his/ her designee. Any waiving of charges should be documented in the patient's chart along with an explanation (e.g., not having the ability to pay the discounted fee, good will, etc.).

11. Applicant notification: The Sliding Fee Discount Program determination will be provided to the applicant(s) in writing, and will include the percentage of Sliding Fee Discount Program write-off, or if applicable, the reason for denial. If the application is approved for less than 100% discount or denied, the patient and/or responsible party must immediately establish payment arrangement with WCPP. Sliding Fee Discount Program applications cover outstanding balances for six months prior to application date and any balances incurred within 12 months after the approved date, unless their financial situation changes significantly. The applicant has the option to reapply after 12 months have expired or anytime there has been a significant change in family income. When the applicant reapplies, the look back period will be the lesser of size months or the expiration of their last Sliding Fee Discount Program application.

12. Refusal to pay: If a patient verbally expresses an unwillingness to pay or vacates the premises without paying for services, the patient will receive an invoice with their payment obligation detail listed. The invoice will include a number to call to discuss payment arrangements. If the patient does not make an effort to pay or fails to respond within 60 days, this constitutes refusal to pay. At this point in time, WCPP CBO can explore options not limited to but including offering the patient a payment plan, waiving of charges (if on the Sliding Discount Fee Program), or referring the patient to collections.

13. Record keeping: Information related to the Sliding Discount Fee Program decisions will be maintained and preserved in confidential electronic file located on a private share drive, with limited access, in an effort to preserve the dignity of those receiving free or discounted care and to protect their information. (S drive->Private->NHSC)

a. Applicants that have been approved (or denied) for the Sliding Fee Discount Program will be logged in a confidential electronic excel file by the Central Billing Office Director or his/her designee. The CBO Director will limit who has access to this file, in an effort to preserve the dignity of those receiving free or discounted care, and to protect their information. Details on the log will include applicant(s) name, account #, dates of coverage, and discount percentage level based on the Sliding Fee Discount Program scale. Denials, if any, are also logged here. (S drive->Private->NHSC)

b. The Central Billing Office Director or his/her designee will run reports weekly to ensure patient accounts are adjusted appropriately, based on the level of discount the patient qualifies for as part of the Sliding Fee Discount Program.

14. Policy and procedure review: The Sliding Fee Discount Program will be reviewed annually by the CFO. The Sliding Fee Scale will be updated during the first quarter of every calendar year with the latest federal poverty guidelines. Pertinent information comparing amount budgeted and actual community care provided shall serve as a guideline for future planning. This will also serve as a discussion base for reviewing possible changes in our policy and procedures and for examining institutional practices which may serve as barriers that prevent eligible patients from having access to our community care provisions.

15. Budget: During the annual budget process, an estimated amount of Sliding Fee Discount Program service will be placed into the budget as a deduction from revenue.

REFERENCE:

Current Federal Poverty Guidelines https://aspe.hhs.gov/poverty-guidelines

Attachments

NHSC Application - WCPP-2019.pdf

Sliding Fee Discount Scale NHSC 2024.docx

Approval Signatures

Step Description	Approver	Date
	Seth Beaver: Chief Financial Officer	03/2024

Applicability

Harris Regional Hospital, Swain Community Hospital

References

Discount, Financial Assistance, NHSC, Physician Billing Services CBO, Sliding Fee Scale

