

Approved By:	Board of Directors	Adopted Date:	Unknown (prior to 2000)
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PURPOSE:

To ensure that Open Door Community Health Centers (ODCHC) maximizes revenues while assisting patients to make use of all available benefits, and to further assure that nothing related to such processes poses barriers to accessing needed services, in compliance with regulations promulgated from time to time by the Bureau of Primary Health Care (BPHC) of the Health Resources and Services Administration (HRSA) of the United States Department of Health and Human Services (DHHS).

DEFINITIONS:

Family: A family is a group of two or more persons related by birth, marriage, or adoption who live together; all such related persons are considered as members of one family.

Income: Earnings over a given period of time used to support an individual/household unit based on a set of criteria of inclusions and exclusions. Income is distinguished from assets, as assets are a fixed economic resource while income comprises earnings.

POLICY:

It is the policy of ODCHC that no patient is denied services due to his or her inability to pay for such services. Further, ODCHC will assure that lack of coverage, financial limitations or the processes to determine program eligibility do not create barriers to care. ODCHC will provide a sliding fee discount for all patients who have no other means of paying for clinic services and who qualify for such discounts based on HRSA-approved definitions of federal poverty level guidelines (FPL) updated annually, income and family size, and no other factors (such as insurance status or population type). Such discounts will include: individuals and families with annual incomes at or below 100% of the FPL guidelines will be charged only a nominal charge for services rendered; individuals and families with annual incomes above 100% and at or below 200% of the FPL guidelines will be charged discounted fees in accordance with family size and income; and, individuals and families with incomes over 200% of the FPL guidelines do not receive discounts.

Patients will be made aware of the sliding fee discount program by multiple methods and in appropriate languages and literacy levels for the health center's target population. All other reasonable means of paying for health services should be explored and eliminated before the patient becomes eligible for on-going participation in the sliding fee discount. Assistance in identifying, making application for and retaining enrollment in available public and private insurance programs will be provided as needed, though not required of the patient. ODCHC may reduce or waive charges as necessary to assure that care is provided. ODCHC may allow presumptive sliding fee scale eligibility for initial visits while potential coverage is explored and/or eligibility determinations are made.

Patients seeking to participate in the sliding fee discount program will be asked for certain information to verify income and family size. The following items serve to verify income and family size:

- Paystubs (within last month)
- Tax returns (most recent year)
- Income Verification Award Letters (State Disability, Social Security, Financial Aid, etc)

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- Worker's Compensation Disability Income Verification
- Financial Aid Award letters, and/or
- For self-employment, tax return with Schedule C or profit & loss statements

Copies of these records need not be retained after review by designated ODCHC personnel. In the absence of any such paperwork, designated personnel may approve self-attestation on the appropriate ODCHC form which includes a statement regarding the accuracy of the information under penalty of perjury. ODCHC staff will make every effort to determine fairly, accurately and correctly if a patient has been non-compliant in verifying income. Exceptions to the Full Pay assignment in cases of failure to provide income verification and any provisions for waiving fee(s) and nominal charges for specific patient circumstances will be determined by approved ODCHC Administrator and applied uniformly to all patients so as not to create barriers to care.

Patients who state that their income is in excess of 200% of FPL guidelines (based on family size and income) need not provide verification. Patients who refuse to provide income information (either verified or by self-attestation) are not eligible for participation in the sliding fee discount program.

The determination of a minor's eligibility for participation in the sliding fee discount program is based on the status of the guarantor (if the guarantor is eligible, so is the minor), with the following exception: should the minor patient be seeking services for which the minor patient may consent (e.g., reproductive health, limited mental health, limited medical care), the minor patient may become his or her own guarantor for such services. Eligibility for participation in the sliding fee discount program is determined based on the minor patient's personal resources.

Patients enrolled in the sliding fee discount program are to be reviewed, following the processes outlined above, for continued eligibility at least once each calendar year as feasible. Sliding fee discounts will be adjusted based on annual updates to FPL guidelines.

ODCHC evaluates the effectiveness of its Sliding Fee Discount Program as part of its overall evaluation of patient satisfaction. Specific questions are included in the evaluation to identify persons or populations who feel the program may pose a barrier to accessing health care services from ODCHC.

REFERENCES:

HRSA Health Center Program Compliance Manual

ASSOCIATED DOCUMENTS:

Sliding Scale Discount Schedule

Sliding Scale Discount Schedule Tool

OPS.017 Sliding Fee Scale (retired)

FIN.025 Sliding Fee Scale (retired)

KEYWORD TAGS:

AG.303 SLIDING FEE DISCOUNT SCHEDULE

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SFS, SFDS, Cash, Private