

WEST HOLT MEDICAL SERVICES CHARITY CARE POLICY

PURPOSE

The Organization recognizes the individual's right to quality healthcare regardless of age, sex, race, religion, national origin, or ability to pay. The Organization will provide medical services to patients who have limited or no financial means. The Organization will, at all times, uphold the Mission Statement of the Organization. The Organization will especially attend to the needs of those who are poor and disadvantaged and act with integrity in all endeavors. This policy outlines the guidelines the organization will use to ensure that adequate and appropriate follow-up is completed to ensure deserving patients receive charity care. The Organization will work with patients to find payment solutions when necessary. This policy is written to ensure a fair and comprehensive system of distributing charity care to the poor and financially burdened within the available resources of the organization.

POLICY

- A. Charity care is a resource of **LAST RESORT** and is only available when all other recovery sources and assets have been exhausted.
- B. Charity service is provided to patients with demonstrated inability to pay as contrasted with bad debt which results from an unwillingness to pay; thus, **CHARITY CARE DOES NOT INCLUDE BAD DEBT.**

PROCEDURE

- A. Reservations/Admission Process
 1. All Emergency Room Departments will maintain an open door policy without regard to the patient's ability to pay.
 2. The organization will identify those patients who are emergency or emergent; and when a determination has been made they are medically indigent, they will not be denied admission.
- B. Verification of Insurance Eligibility and Benefits
 1. The patient will execute an assignment of insurance benefits on behalf of the organization.
 2. All verification will be performed upon notice of reservation or upon admission.
- C. Financial Counseling
 1. All patient admissions will be evaluated to determine payment source and patient's ability to pay.
 2. The organization will help patients seek reimbursement from local, state, and federal programs when there is no other source of payment.
- D. Application Process
 1. Application for charity care will be completed when it is evident that a patient does not have third-party coverage or will have a substantial personal payment responsibility and does not have the resources to make such a payment.
 2. The application process can take place at the time of service (during admission or during discharge planning) or at a later date when it is discovered that insurance has denied coverage, or the patient's financial condition changes.
- E. Fee Schedule
 1. The amount of charity care write-off will be based on the charity care sliding-fee schedule and based on the current Federal Government private guidelines, as published annually in the *Federal Register*.

2. The sliding-fee schedule will be used as a guide to identify the amount of charity care granted using the applicant's financial statement (Attachment B) and applicable supporting documentation.
 - a. Verification may include receiving a copy of the applicant's federal tax return, pay stub, a call to employers, credit report, or any of the above.
 - b. Bank statements for the last three months may be requested.
 - c. The applicant's net worth and/or liquid assets will also be a determining factor in the decision for the amount of charity care being granted.

F. Record Keeping and Special Accounting for Charity Care

1. All financial documentation gathered on potential applicants will be confidentially filed with the Patient Financial Counselor.
2. Eligibility of each applicant will be approved and authorized based on the authorization levels
3. Informational copies of all write-offs greater than \$1,000 will be forwarded to the CFO and CEO.
4. The charge-off authorization form and supporting documentation will be maintained in a confidential file.

G. Notification of Charity Determination to Patients/Physicians

1. Once a determination of charity care has been authorized, a letter indicating the free care amount and remaining balance due, if any, may be sent to the patient or guarantor.
 - a. This will be left to the discretion of the CFO &/or CEO.

H. Special Consideration

1. The Organization reserves the right to **ALLOW OR DISALLOW CHARITY**.
 - a. Decision may be based on the patient's or responsible party's ability to pay, as determined by the financial investigation.
 2. Circumstances not specifically covered by this policy will arise wherein a person will be entitled to service without charge or at a charge that is less than the reasonable cost of the service provided.
 - a. This could be occasioned by a personal catastrophe or unavoidable crisis affecting an individual who would otherwise be able to pay for services, or a person who has income above poverty level but is still not able to pay the entire cost of services.
 1. In such instances, the Organization will exercise its discretion in determining the individual's eligibility for charity care.