

Community Health Systems Professional Service Corporation	REFERENCE # 5009
CENTER: Pinellas Surgery Center, LLC	PAGE: 1
POLICY TITLE: Financial Assistance Policy	OF: 3
	REVISED:
EFFECTIVE: 01/01/2019	AAAHC Required

PURPOSE:

To properly identify those patients who are financially indigent, who do not qualify for state and/or government assistance, and to provide assistance with their Ambulatory Surgery Center medical expenses.

ELIGIBILITY FOR FINANCIAL ASSISTANCE/CHARITY CARE

1. FINANCIAL INDIGENT:

- A. A financially indigent person is a person who is uninsured and is accepted for care with no obligation or a discounted obligation to patient to pay for services rendered based on the facility's eligibility criteria as set forth in this policy.
- B. To be eligible for financial assistance/charity care as a financially indigent patient, the patient's total household income shall be set at or below 150% of the current Federal Poverty Income Guideline. (see Exhibit I) The facility may consider other financial assets and liabilities for the person when determining eligibility.
- C. The facility will use the most current Federal Poverty Income Guideline Issued by the U.S. Department of Health and Human Services to determine an individual's eligibility for charity care as a financially indigent patient.

2. PRESUMPTIVE ELIGIBILITY:

- A. Patients covered by out of state Medicaid where the facility is not an authorized provider and where the out of state Medicaid enrollment or reimbursement makes it prohibitive for the facility to become a provider, will be eligible for charity upon verification of Medicaid coverage for the service dates, since they will be considered uninsured. No other documents will be required in order to approve the charity application. The patient will be required to make a formal financial assistance/charity application. The facility may submit the application and verification of Medicaid coverage as proof of qualification.
- B. Medicaid patients who exhaust their coverage and benefits will also be eligible for financial assistance for medically necessary hospital services.
- C. Deceased patients with no estate who have an outstanding account guarantor balance will be written off after one statement is sent.

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3. MEDICALLY INDIGENT:

- A. A medically indigent patient is a person who is uninsured or whose medical bills after payment by third party payer exceed a specified percentage of the person's annual gross income and who is unable to pay the remaining bill.
- B. To be eligible for financial assistance as a medically indigent patient, the patient's total household income shall be at or below 150% of the current Federal Poverty Income Guidelines(see Exhibit I) and their facility medical expenses for the proceeding 12 month period exceeds 25% of the family annual gross income.
- C. The facility may consider other financial assets and liabilities for the person when determining eligibility, but in no case will the facility require a patient to 'spend down' more than 50% of their savings in order for the patient to qualify for financial assistance towards their remaining balance.
- D. If a patient meets the medically indigent income and medical expense criteria, and have no savings or assets, they will eligible for a full write-off of the facility medical expenses.

FACTOR TO BE CONSIDERED FOR CHARITY DETERMINATION

- A. The following factors are to be considered in determining the eligibility of the patient for financial assistance/charity care:
 1. Gross Income
 2. Family Size
 3. Employment status and future earning capacity
 4. Other financial resources
 5. Other financial obligations
 6. The amount and frequency of facility and other medical bills
- B. The income guidelines necessary to determine the eligibility for financial assistance/charity care discounts, are attached on Exhibit I, as well as the current Federal Poverty Guidelines.

FAILURE TO PROVIDE APPROPRIATE INFORMATION

- A. Failure to provider information necessary to complete a financial assessment with 30 days of the request may result in a negative determination.
- B. The account may be reconsidered upon receipt of the required information, providing the account has not been written off to bad debt.

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4. TIME FRAME FOR ELIGIBILITY DETERMINATION

A determination of eligibility will be made by the Business Office within 30 working days after the receipt of all information necessary to make a determination.