POLICY AND PROCEDURE MANUAL

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POLICY:

The Center for Life Resources (Center) will establish procedures to ensure that the financial capacity of individuals who need quality healthcare services does not prevent them from seeking or receiving care; and to further establish procedures to provide charity care to persons who have healthcare needs and are uninsured, underinsured, or otherwise unable to pay, for medically necessary care based on their financial situation.

References:

1 Texas Administrative Code (TAC) §355.8215; Healthcare Financial

Management Association guidance found in the June 2019 Statement 15:

"Valuation and Financial Statement Presentation of Charity Care, Implicit Price

Concessions and Bad Debts by Institutional Health Care Providers"

Shane Britton, Chairman

Date: 9-1-2012

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PROCEDURES:

- Individuals receiving services are expected to cooperate with the Center's procedures for
 obtaining charity care or other forms of payment or financial assistance and to contribute
 to the cost of their care based on their ability to pay subject to the rules, regulations, and
 contractual requirements of the Center's various funding agencies.
- 2. Definitions: For these Procedures, the terms below are defined as follows:
 - A. Charity Care: Healthcare services that have been or will be provided but are never expected to result in cash inflows. Charity care results from the Center's policy to provide healthcare services free or at a discount to clients who meet the established criteria.
 - B. Bad Debt: Healthcare services that have been or will be provided and cash inflow is anticipated for all or a portion of the charge. Includes the monthly Sliding Scale Fee Schedule charges not collected for clients above 150% of FPL. Bad Debt is not eligible for reimbursement from federal charity care programs
 - C. Family: According to the Census Bureau, a group of two (2) or more people who reside together and are related by birth, marriage, or adoption. In addition, according to Internal Revenue Service rules, if a client claims someone as a dependent on their income tax return, that person may be considered a dependent for financial assistance.
 - D. Family Income: Family Income is determined using the Census Bureau definition, which uses the following income when computing federal poverty guidelines:
 - (1) Includes:
 - a. Earnings
 - b. Unemployment compensation
 - c. Workers' compensation
 - d. Social Security
 - e. Supplemental Security Income
 - f. Public assistance
 - g. Veterans' payments
 - h. Survivor benefits
 - i. Pension or retirement income
 - j. Interest
 - k. Dividends
 - 1. Rents
 - m. Royalties
 - n. Income from estates
 - o. Trusts
 - p. Educational assistance
 - q. Alimony
 - r. Child support

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- Assistance from outside the household S.
- t. Other miscellaneous sources.
- Noncash benefits (such as food stamps and housing subsidies) do not (2)
- (3) Determined on a before-tax basis
- (4) Excludes capital gains or losses
- (5) If a person lives with a family, include the income of all family members (non-relatives, such as housemates, do not count).
- Uninsured: A person who has no level of insurance or third-party assistance with E. meeting their payment obligations.
- F. Underinsured: A person with some level of insurance or third-party assistance still has out-of-pocket expenses exceeding their financial abilities.
- Gross charges: Total charges at the Center's full established rates for providing G. client care services before deductions from revenue are applied.
- Sliding Scale Fee Schedules: Client financial share calculated utilizing rules, H. regulations, and contractual requirements of the Center's various funding agencies, including:
 - The Texas Health and Human Services Commission (HHSC) Mental (1) Health (MH)/Individuals with Intellectual and Developmental Disabilities (IDD)
 - (2) HHSC Early Childhood Intervention (ECI)
 - **HHSC Autism** (3)
 - The Texas Department of Criminal Justice (TDCJ) Texas Correctional (4) Office on Offenders with Medical or Mental Impairments (TCOOMMI)
- Services Eligible Under This Policy. For purposes of this policy, "charity care" or 3. "financial assistance" refers to healthcare services provided by the Center without charge or at a discount to qualifying clients. The following healthcare services are eligible for charity care:
 - Behavioral health services A.
 - B. **Immunizations**
 - C. Public health services
 - Other preventative services
- Eligibility for Charity Care. Eligibility for charity care will be considered for those clients 4. who are uninsured, underinsured, and unable to pay for their care, based upon a determination of financial need following these Procedures.
 - The granting of charity care is based on an individualized determination of financial need and does not consider age, gender, race, social or immigrant status, sexual orientation, or religious affiliation.
 - The method by Which Clients May Apply or be Assessed for Charity Care: B. Financial need is determined following procedures that involve an individual assessment of financial need and may

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- (1) Include an application or assessment process in which the individual or the individual's Legally Authorized Representative (LAR) is required to cooperate and supply personal financial and other information and documentation relevant to determining financial need.
- (2) Include external publicly available data sources that provide information on a client's or LAR's ability to pay (such as credit scoring).
- (3) Include reasonable efforts by the Center to explore alternative sources of payment and coverage from public and private payment programs and assist clients in applying for such programs.
- (4) Consider the client's available assets and all other financial resources available to the client.
- (5) Include a review of the client's outstanding accounts receivable for prior services rendered and the client's payment history.
- C. A request or assessment for charity care and a determination of financial need can be done at any point in the collection cycle but is preferred to be completed within the first thirty (30) days of treatment. The need for financial assistance is reevaluated annually and whenever a significant change has occurred, affecting the client's or LAR's eligibility for charity care.
 - (1) The Center's values of human dignity and stewardship shall be reflected in the application, financial need determination, and granting of charity care.
 - (2) Requests for charity care shall be processed promptly with notification to the client or LAR in writing within thirty (30) days of receipt of a completed application or assessment.
- 5. Presumptive Financial Assistance Eligibility. There are instances when a client may appear eligible for charity care discounts, but there is no financial assistance form on file due to a lack of supporting documentation. Often there is adequate information provided by the client served or through other sources, which provide sufficient evidence to provide the client with charity care assistance. If there is no evidence to support a client's eligibility for charity care, the Center can use outside agencies to determine estimated income amounts for the basis of charity care eligibility and possible discount amounts. Once determined, due to the inherent nature of the presumptive circumstances, the only discount that can be granted is a hundred percent (100%) write-off of the account balance. Presumptive eligibility may be determined based on individual life circumstances that may include:
 - A. State-funded prescription programs
 - B. Homeless or received care from a homeless clinic
 - C. Participation in Women, Infants, and Children programs (WIC)
 - D. Food stamp eligibility
 - E. Subsidized school lunch program eligibility
 - F. Eligibility for other state or local assistance programs that are unfunded (e.g., Medicaid spend-down)

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G. Low income or subsidized housing is provided as a valid address

- H. The individual is deceased with no known estate
- 6. Eligibility Criteria and Amounts Charged to Clients. Services eligible under this policy are made available to clients on Sliding Scale Fee Schedules, per financial need, based on the Federal Poverty Levels (FPL) in effect at the time of the determination. The basis for the amounts charged to clients served who qualify for financial assistance is as follows:
 - A. Clients whose family income is at or below 150% of the federal poverty level (FPL) are eligible to receive services at a discount of 100%.
 - B. Clients whose family income is above 150% but not more than 200% of the FPL are eligible to receive services at a discount (partial charity care) at rates discounted using Sliding Scale Fee Schedules. Uncollected fees assessed are Bad Debt and ineligible for reimbursement under federal charity care programs.
 - C. Clients whose family income exceeds 200% of the FPL may be eligible to receive discounted rates on a case-by-case basis based on their specific circumstances, such as catastrophic illness or medical indigence, at the discretion of the Center; however, the discounted rates shall not be greater than the amounts generally billed to private or public insurance and discounted using Sliding Scale Fee Schedules. Uncollected fees assessed are Bad Debt and ineligible for reimbursement under federal charity care programs.
- 7. Communication of the Charity Care Program to Clients and Within the Community.

 Notification about charity care available from the Center includes a contact number and is disseminated by various means, which include, but are not limited to, the publication of notices in monthly statements and by posting notices in clinics, waiting areas, intake and assessment, business offices, and financial services that are located in Center facilities, and other public places as elected.
 - A. The Center widely publicizes a summary of this charity care policy on the Center website, in brochures available on client access sites, and at other places within the community served by the Center.
 - B. Such notices and summary information are provided following the Center's Cultural and Linguistic Competency Plan.
- 8. Relationship to Collection Policies:
 - A. The Center develops procedures for internal and external collection practices (including actions the Center may take in the event of non-payment, including collections action and reporting to credit agencies) that take into account:
 - (1) The extent to which the individual qualifies for charity care
 - (2) The individual's good faith effort to apply for charity care from the Center
 - (3) The individual's good faith effort to comply with their payment agreements with the Center
 - B. For clients who qualify for charity care and who are cooperating in good faith to resolve their discounted bills, the Center may:
 - (1) Offer extended payment plans

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	(2)	Not se	nd unpaid bills to outside collection agencies	
C.				
	(3)	Other I	legal actions for any client without first making reasonable tine whether that client is eligible for charity care under the fal assistance policy. Reasonable efforts shall include: Validating that the client owes the unpaid charges and all of third-party payment have been identified and billed by	sources
		b.		client the
		c.		al
		d.	Documentation that the client has been offered a payment	t plan but
com	pliance v	ith all o	ents. Implementation of this Policy does not negate or sup ther federal, state, and local laws, rules, and regulations ap	
Executive I	Director:			
	com to th	. Regulatory R compliance w	(3) Cease C. The Center wi (1) Wage (2) Liens (3) Other determ financia a. b. c. d. Regulatory Requirem compliance with all o to the services outline	(3) Cease all collection efforts. C. The Center will not impose extraordinary collections actions such as: (1) Wage garnishments (2) Liens on primary residences (3) Other legal actions for any client without first making reasonable determine whether that client is eligible for charity care under this financial assistance policy. Reasonable efforts shall include: a. Validating that the client owes the unpaid charges and all of third-party payment have been identified and billed by Center b. Documentation that the Center has attempted to offer the opportunity to apply or be assessed for charity care under policy and that the client has not complied with the Center financial assessment requirements. c. Documentation that the client does not qualify for financial assistance on a presumptive basis. d. Documentation that the client has been offered a payment has not honored the terms of that plan. Regulatory Requirements. Implementation of this Policy does not negate or sup compliance with all other federal, state, and local laws, rules, and regulations approaches the services outlined herein.