



Origination 07/2022
Last Approved 07/2022
Effective 07/2022
Last Revised 07/2022
Next Review 07/2025

Owner Laura Ward:
Admin Director,
BlueMD
Policy Area Physician
Network -
BlueMD
Applicability Pardee Hospital

Discounted Services

POLICY: Discounted Services-Pardee BlueMD Practices (FQHC)

OBJECTIVE: Pardee BlueMD shall maintain a fee schedule designed to cover reasonable costs of providing services and based on locally prevailing charges. Further, Pardee BlueMD shall establish and maintain a Sliding Fee Discount Schedule (SFDS) that provides for discounted fees based on the patient and/or guarantor's ability to pay.

RESPONSIBILITY: BlueMD CEO, CFO and Administrative Director

REFERENCE:

1. The SFDS will be revised at least annually upon revision of the Federal Poverty Guideline (FPG) as published in the Federal Register.
2. The SFDS matrix will be reviewed and approved not less frequently than annually by the Pardee

BlueMD Board of Directors.

3. The SFDS will provide for discounts for all individuals and families at or below 200% of the FPG.
4. The SFDS will provide for a 100% discount and a nominal payment for individuals and families receiving primary services and that are at or below 100% of the FPG.
5. Nominal fees will be determined by the Board of Directors after recommendation from the CFO. This nominal fee schedule will be determined by reviewing financial indicators, including, but not limited to: average patient incomes, affordability of services to the patient population, and local and state average rates for services.
The nominal fee schedule will be reviewed annually for competitiveness, consistency and completeness.
6. The SFDS will provide for partial sliding fee discounts and/or nominal fees for individuals and families above 100% and at or below 200% of the FPG.
7. The SFDS will provide no discount for individuals earning over 200% of the FPG.
8. The SFDS shall be based upon the FPG as published annually in the Federal Register and will consider, at a minimum, the following factors:
 1. Family size – Family is defined as a specific group of people that may be made up of partners, children, parents, aunts, uncles, cousins and grandparents. To be considered for purposes of establishing eligibility for the SFDS, family members must be dependent on the family for their support.
 2. Income – annual income of the applicant. Income includes: earnings, unemployment compensation, workers' compensation, Social Security, Supplemental Security Income, veterans' payments, survivor benefits, pension or retirement income, interest, dividends, rents, royalties, income from estates, trusts, educational assistance, alimony, child support, assistance from outside the household, and other miscellaneous sources. Non-cash benefits (such as food stamps and housing subsidies) do not count.
 3. Household Income – total income of all members of a group of individuals living in the same household.
9. Each patient eligible for discounted fees shall be assigned a "Plan" which shall indicate the level of discount
10. Individual SFDS shall be established by category for the following categories of service:
 - A.
 1. Medical care and behavioral health
 2. Other individual categories may be identified from time to time.
11. Sliding Fee Scales shall be prominently displayed at all Pardee BlueMD locations in the front office patient areas.
12. All patients will be offered the opportunity to apply for the SFDS regardless of their third party insurance coverage.
13. Patients requesting discounted services shall;

- A. Undergo and complete an application process; and
- B. Provide the necessary documentation as indicated on the application form which may include:
 - 1. W-2's
 - 2. Income Tax forms
 - 3. Bank Statements
 - 4. Pay Stub
 - 5. Letter from Employer
 - 6. Self-Declaration of income on the application
 - 7. Unemployment compensation, workers' compensation, Social Security, Supplemental Security Income, veterans' payments, survivor benefits, pension or retirement income, interest, dividends, rents, royalties, income from estates, trusts, educational assistance, alimony, child support, assistance from outside the household, and other miscellaneous sources.
 - 8. Any other information that supports income reported.

3. Customer Service Representative will review information.

- C. 4. Patients who refuse to provide the necessary income documentation within 30 days of their initial appointment and after being informed of the availability of discounts, will be considered to have declined the offer of a discount and will be responsible for the full, undiscounted charge.

5. All income reported to Pardee BlueMD through this process may be verified to ensure qualification for the appropriate discounted fee category.

14.

- A. Pardee BlueMD prohibits discounting services to patients who:
 - 1. Have not completed the full application process, including providing necessary income documentation per timeframes established in this policy.
- B. 2. Do not qualify for discounted services

15.

- A. Violation of item #14 above by any employee or official of Pardee BlueMD for any patient/client shall be in violation of federal grant requirements and subjected to disciplinary action as outlined in the organization's policies and bylaws.
- B. Patients will be qualified for discount services based on the income documentation provided for the following time frames, unless there is a change to gross household income or family size:

Type of Income	Number of Days Qualified for Slide before Re-Application is required
Income tax forms, including W-2 forms	365 (1 year)

Unemployment compensation, workers' compensation, Social Security, Supplemental Security Income, veterans' payments, survivor benefits, pension or retirement income	365 (1 year)
Bank Statements	365 (1 year)
Pay Stub	365 (1 year)
Letter from Employer	365 (1 year)
Interest, dividends, rents, royalties, income from estates, trusts, educational assistance, alimony, child support, assistance from outside the household, and other miscellaneous sources	365 (1 year)
Self-Declaration of Income - signing form and/or patient's own letter	180 (6 months)
Any other documents that support income – may include statements of job status from shelters	365 (1 year)

16. All New Patients will be interviewed by the Customer Service Representative or designee at their first visit, or as soon as possible.

17. All patients that are re-qualifying will be briefly interviewed by the Customer Service Representative to review and update (if needed) all information on the application, including proof of income. Any patient not completing this process will be changed to self-pay fee category and the chart will be flagged for update of slide fee information.

18. No individual will be denied access to care based solely on their ability to pay.

19. Individuals who utilize self-declaration of income for application to the sliding fee discount program may only use method of income verification once during a calendar year. The initial approval time frame is for a 180-day period (6 months). After the 180-day period (6 months from the date of the application), individuals must show some form of income verification and if none exists, the individual must produce a letter of support from a person(s) providing income, housing, food, etc. to the individual. Without the additional supporting documentation, the individual's payor source will be moved to the self-pay (full charge) category.

20. In consideration of the special characteristics of the homeless populations served by Pardee BlueMD, self-declaration of individual income will be allowed without limitation to the time frames and requirements as listed above.

21. Pardee BlueMD may waive the fees charged to patients, in any of the slide categories, when specific situations warrant such a waiver. Such waivers may be used if reviewed and approved by at least one of the following officers: Chief Financial Officer, Administrative Director, and/or Chief Executive Officer.

PROCESS:

- A. All patients as outlined in the policy above are offered the opportunity to apply (or re-apply) for discounted services.
1. During new patient registration, or
 2. During the demographic information verification process; or
 3. Upon the expiration of an existing SFDS application approval.
 4. When a change of income or family size occurs in household.
 5. Interested individuals are provided with an application form and a brief explanation of the Discount Services Program, and are asked to complete the application. The Customer Service Representative or Practice Manager may assist patients in completing the application process
 6. The Customer Service Representative or Practice Manager shall review with the patient each section of the application form for accuracy and shall gather the appropriate supporting documentation. The Customer Service Representative, Practice Manager, or any other representative of Pardee BlueMD may verify income from any source by any method to ensure accurate information is provided on the discount services application.
 7. The Customer Service Representative will enter the information into the electronic health record:
 - Use the verified and/or determined patient gross income for "household income," and enter Family size.
 - Populate the effective dates of eligibility.
 8. The system will automatically calculate the appropriate patient sliding fee class using the available information.
 9. The patient shall be notified of his/her household's slide type, expected payment and next review date.
 10. The sliding fee scale application and supporting documentation shall be scanned into the electronic health record system, Epic. Documents will reside under the Media Tab labeled SFDS and date. The Declination Form will be labeled Decline SFDS and Date. Scanned documents will be routed to the Practice Manager In-Box for audit and review. The practice manager will sign and date the application when the audit is complete.
 11. The Practice Manager will complete monthly audits on all sliding fee scale patient applications. The audits will be completed by the Practice Manager who did not complete the discount services application with the patient. Sliding fee application audits will be documented in the electronic health record. Reports of audit activity will be completed weekly to ensure timely completion of slide fee application audits.
 12. The payment due is expected at the time of approval of the discount services application by the Customer Service Representative and will be due at check-in. If the patient or guarantor is unable to make the payment at the time of check-in, they will be offered the opportunity to establish a payment plan.

Reviewed and approved by BlueMD CFO, Administrative Director and BlueMD Board of Directors

REFERENCES:

- Sliding Fee Schedule 9591-1521
- Application for Discounted Services 9591-1523
- Sliding Scale declined form 9591-1522

Approval Signatures

Step Description	Approver	Date
Policy Owner	Laura Ward: Admin Director, BlueMD	07/2022
VP Approval	Johnna Reed: Chief Administrative Officer	07/2022
Editor	Kimberly Frost: Dir Physician Practice Operati [LW]	07/2022
Editor	Laura Ward: Admin Director, BlueMD	07/2022