

TITLE: FINANCIAL ASSISTANCE POLICY NUMBER: 8610-553

ORIGINATING DEPT: ADMINISTRATION

APPROVED BY: PAGE 1 OF 3

GENERAL POLICY STATEMENT:

It is both the philosophy and practice of Columbia Memorial Hospital that medically necessary healthcare services should be available to all individuals, regardless of their ability to pay.

Columbia Memorial Hospital assists persons with financial need by waiving all or part of the charges for services provided by any department of Columbia Memorial Hospital.

PURPOSE:

To ensure that Columbia Memorial Hospital meets its community obligations to provide financial assistance in a fair, consistent, and objective manner.

PROCEDURE:

A. Eligibility Criteria:

Financial counselors and Business Office personnel are available to help patients identify financial options or assistance programs.

Financial assistance is secondary to all other financial resources available to the patient, including insurance, government programs, third party liability, and assets.

Full financial assistance will be provided for applicants with gross family income at or below 200 percent of Federal Poverty Guidelines.

A sliding fee scale will be used to determine financial assistance discounts for applicants with gross family income above 200 percent but below 400 percent of Federal Poverty Guidelines.

A notice of determination will be sent to the applicant within 30 days of receipt of a completed application.

B. Eligibility Determinations:

The provision of healthcare should never be delayed pending an assistance determination.

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PROCEDURE (CON'T)

Requests for financial assistance may be made at any point before, during, or after the provision of care. Financial assistance is specific for each admission or service that are under a period of care.

Anyone wishing to make application for financial assistance with Columbia Memorial Hospital will be given a Financial Assistance Application, which includes instructions on how to apply.

Consideration for financial assistance will occur once the applicant supplies a completed Financial Assistance Application with supporting documents to the Columbia Memorial Hospital Business Office.

Columbia Memorial Hospital will make every attempt to make assistance determinations within 30 days of receiving a completed Financial Assistance Application. Accounts pending a determination will be placed on hold (no collection effort made) for up to 30 days while the application is being processed.

Consideration for assistance includes a review of the responsible party's annual household income, number of people in the home, assets, credit history, existing debt and other indicators of the party's ability to pay. These are merely guidelines; each individual situation should be reviewed independently. Allowances may be made for extenuating circumstances.

Acceptable verification of income includes the following: the most current 90 days' worth of payroll stubs; a copy of the most current year's IRS tax return; verification of Social Security or unemployment benefits. In the absence of income, a letter of support from individuals providing for the patient's basic living needs will be accepted.

Columbia Memorial Hospital will keep all applications and supporting documentation confidential. Columbia Memorial Hospital may, at its own expense, request a credit report to further verify the information on the application. Incomplete applications may be denied and returned with a statement of what information is needed and how to re-apply.

Financial assistance may be denied if the application is not completed and returned to Columbia Memorial Hospital within 30 days of receipt by the responsible party.

Financial assistance will not be considered without a completed Financial Assistance Application unless sufficient like information can be obtained that allows for a final determination without an application. In extenuating circumstances, where it can support a financial hardship exists, Columbia Memorial Hospital may offer financial assistance at its own determination.

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PROCEDURE (CON'T):

Financial assistance is not granted for some procedures, such as elective cosmetic surgery or some special situations, such as that of an individual who is eligible for insurance or a state funded program (Medicaid) but has refused to apply. The Business Office Manager should be consulted in these special situations.

The Business Office Manager will make the final determination on all applications for financial assistance. Any requests over \$5,000.00 must also be approved by the CFO.

C. Appeals:

The applicant may appeal a financial assistance determination by providing additional information, such as income verification or an explanation of extenuating circumstances, to the Business Office Manager within 30 days of receiving notification. The Business Office Manager will review all appeals and submit to Chief Financial Officer for final determination. The responsible party will be notified of the appeals outcome. Collection efforts on accounts will be placed on hold during the appeal process.

ORIGINATED BY: Business Office

APPROVED BY: Administration

EFFECTIVE DATE: 10/23/87

REVISED: 10/8/93, 9/21/98 Department Managers, 8/2/01 – Board of Trustees
9/6/01; 9/17/02 (CFO); 11/4/04 Board of Trustees

DISTRIBUTION: Hospital Wide