

<b>Willamette Falls Hospital</b>		<b>Policy/Procedure</b>
<b>Subject:</b>	Financial Assistance	<b>No. 8311.1.303</b>
<b>Previous:</b>	Replaces 5/94 Charitable Care policy and subsequent revisions (4/95, 3/98, 12/99, 1/01, 3/03, 1/05)	<b>Previous #:</b> Policy 3.03
<b>Revised:</b>	05/2006, 10/2006	<b>Effective:</b> 05/15/2006
<b>Reviewed:</b>	05/15/2006,	<b>Involved Departments:</b> Access Services and PFS

### **POLICY STATEMENT**

In keeping with our mission, vision and values, Willamette Falls Hospital cares for people and their health needs even if they can't afford to pay their bills.

We encourage patients who are having trouble paying for all or some of their health care to talk with someone in Access Services or Patient Financial Services about how we may be able to help them.

Willamette Falls Hospital offers several ways to help patients with their medical bills:

- Discounts for uninsured patients
- Help in applying for assistance from government and community programs
- Financial assistance program
- Payment plan options

#### **What is Covered**

Financial assistance is available to cover all medically necessary services provided by Willamette Falls Hospital, including hospital inpatient, outpatient services, and services provided by our internal medicine and immediate care clinics.

#### **Government and Community Programs**

Uninsured patients may be eligible to apply for other programs to get financial help. We will help patients find out whether these programs (such as the Oregon Health Plan, Medicare and Medicaid) can help cover medical bills.

#### **Discounts for Uninsured Patients**

Willamette Falls Hospital provides a discount to patients who don't have health insurance coverage. This discount lowers the amount owed by 20 percent and is automatically applied to all self pay accounts at time of billing. If it turns out that we applied the discount in error (for instance, if the patient has insurance we didn't know about) we will reverse the discount before we bill insurance.

#### **Financial Assistance Program**

Willamette Falls Hospital may be able to help uninsured or insured patients who have limited incomes and are unable to pay their Willamette Falls Hospital medical bills. Any patient with household income

under 400 percent of the federal poverty guidelines, published by the U.S. Department of Health and Human Services, is eligible for financial assistance on a sliding scale.

Financial assistance determinations will be consistent among patients regardless of their age, sex, race, creed, disability, sexual orientation, national origin or immigration status.

### **Payment Plan Options**

Even after discounts and financial assistance, patients still may owe some money for their medical bills. Willamette Falls Hospital will work with patients to set up a low-interest payment plan. Typically payment plans should extend no further than 24 months.

## **PROCEDURE**

### **(1) Scheduled admits**

If the medical service is a scheduled inpatient or same-day surgery, the hospital will determine how much the service is expected to cost and contact the patient by telephone or by letter beforehand to discuss the hospital's payment expectations and assistance options. This process has two steps:

- Verification of insurance eligibility and benefits for insured patients
- Financial counseling for both insured and uninsured patients

### **Insurance Verification**

#### **A Willamette Falls Hospital insurance verifier:**

- Verifies eligibility and benefits by calling the patient's insurance or checking the payer's website as soon as the surgery has been scheduled.
- Calls the payer to obtain prior authorization if required.
- As a last resort, postpones or cancels all non-urgent surgeries that the payer hasn't authorized by at least 1 day before the surgery IF:
  - Insurance verifier determines that we do not have an authorization on file
  - The physician office has not requested one and it is too late to obtain one
  - The physician and the hospital agree that it is safe to cancel or postpone the surgery pending authorization

### **Financial Counseling**

#### **A Willamette Falls Hospital financial counselor:**

- Determines the expected cost of a procedure and calculates the likely out-of-pocket cost for both insured and uninsured patients.
- Checks past accounts to see if the patient has been here before and what kind of payment history he or she has.
- For insured patients: Asks for 100 percent of the expected deductible, co-pay and coinsurance (if known) upfront if out-of-pocket costs exceed \$500.
- For uninsured patients: Asks for 50 percent of the expected cost (before any discount) upfront. Upon pre-payment of half of the estimated bill, the hospital will discount total charges by 20

percent and apply that discount to the remaining portion of the bill. This discount only applies to uninsured patients.

- These are guidelines only, not hard-and-fast rules. Realizing that healthcare bills can be unexpected and very large, the hospital will at all times be respectful, flexible and accommodating in its financial expectations and adhere to its mission, vision and values.
- Explores other payment options, including financing the balance via a low-interest credit agreement. This financing is available to both insured and uninsured patients.
  - The length of payment plan options can range from 1 month to 24 months, depending on the amount of the remaining balance to be paid. Payment plans longer than 6 months may be assessed a small monthly processing fee. Payment plans longer than 24 months require approval of the Director of Revenue Cycle..
- Advises uninsured patients of any government programs they might qualify for and helps them apply.
- Asks patients who cannot pay or have difficulties meeting our payment expectations about their household income, assets and family size to see if they might qualify for financial assistance. Gives or sends them a financial assistance application form if it seems likely they will qualify.
  - Any patient can apply to receive financial assistance, whether they have insurance or not.
  - Patients are asked to complete a financial questionnaire, available in English and Spanish, and submit supporting documentation. Examples of supporting documentation are income statements, tax return forms and verification of living expenses.
  - Applications for financial assistance must be complete and must include all of the required attachments, to the extent the patient or his/her representative can reasonably provide the necessary information.
  - While we encourage patients to apply for financial assistance before they receive services, this is not a requirement.
- In rare cases only, the financial counselor may call the physician to see if the surgery can safely be postponed IF:
  - The surgery is at least 3 business days in the future.
  - The patient's income and resources, based on the information provided to us, exceed the financial assistance guidelines of this policy AND the patient declines to pay upfront or make satisfactory payment arrangements.
- **In no case will Willamette Falls Hospital cancel a scheduled surgery unilaterally without the explicit consent of the physician.**

## **(2) Unscheduled inpatient admissions**

Patients may apply for financial assistance at any time: before service, during their hospital stay, after discharge, once they receive a bill, or after their account has been sent to an outside collection agency. Requests for financial assistance do not have to be initiated by the patient. Outside health providers, community or religious groups, social services, family members, and Willamette Falls Hospital personnel can also advocate for financial assistance for the patient.

A financial counselor will attempt to make personal contact with all uninsured patients or insured patients with large co-pays by visiting them in their room. If the patient is uninsured, the financial counselor will determine if the patient might qualify for assistance through a government or community program and starts the enrollment process. If not, the financial counselor will explain Willamette Falls Hospital's discount and financial assistance programs, give the patient a financial assistance application and offer to assist with the application process.

**(3) Scheduled OB deliveries**

Willamette Falls Hospital asks maternity patients who scheduled their delivery with us at least 2 months before their expected delivery date to pay their estimated charges in full by their delivery date or contact the Patient Financial Services Department if this poses a hardship. The financial counselor and Birthplace staff work together to encourage uninsured mothers to enroll their newborns in the Oregon Health Plan in a timely manner so we can bill for our services.

**(4) All other services (i.e., scheduled or unscheduled outpatient services)**

Willamette Falls Hospital presently asks outpatients to pay co-pays, deductibles or deposits at time of service.

**(5) Financial assistance for Oregon Health Plan (OHP) patients**

Current Medicaid eligibility or within 60 days of service qualifies a patient for automatic financial assistance. However, services “below the OHP line” are deemed not medically necessary whether the patient has Medicaid or not. Physicians and patients can appeal that determination and ask the hospital to review the case for clinical appropriateness. Medicaid patients scheduled for or receiving services “below the OHP line” must sign a waiver of liability.

**(6) Pro bono services**

If a patient or their advocate finds a physician who is willing to perform a medically necessary surgery pro bono, the patient can receive their services at Willamette Falls Hospital subject to the financial assistance options described in this Policy. Pro bono services are subject to the same eligibility and documentation requirements as other Willamette Falls Hospital services.

**(7) Elective surgeries**

Purely elective surgeries must be paid in full beforehand (no discount) or will be canceled right up to the time of surgery.

**(8) Appeals of financial assistance decisions**

Patients are notified of financial assistance decisions by phone or in writing.

Patients may appeal a financial assistance decision by providing additional information such as income verification or an explanation of extenuating circumstances within 30 days of receiving notification. The Director of Revenue Cycle reviews all appeals. The patient will be notified of the appeals outcome. Collection follow-up is pended during the appeal process.

**APPLYING FOR FINANCIAL ASSISTANCE**

**(1) Communication to patients**

Willamette Falls Hospital advises patients and their families of the hospital’s financial assistance program in the following manner:

- Notices advising patients that Willamette Falls Hospital provides financial assistance are posted in key areas of the hospital, including Access Services, the Emergency Department, Immediate Care and the Patient Financial Services Department.
- The Conditions of Admissions form informs patients of their right to apply for financial assistance.
- Brochures and application forms are available in Access Services, Immediate Care, the Emergency Department, and the Patient Financial Services Department.
- Willamette Falls Hospital staff in Access Services, Insurance Verification / Financial Counseling, Social Services and the Patient Financial Services Department are trained to answer questions about the hospital’s financial assistance program and refer patients to someone who can help them apply.
- All patient billing statements inform patients that financial assistance is available.
- Patients can call 503-557-2189 to request an application form by mail.
- The application form is available in English and Spanish and includes instructions in how to complete the form.

**(2) Eligibility**

Both insured and uninsured patients are eligible for financial assistance. All patients applying for financial assistance program must meet an income test based on federal poverty guidelines. .

Income - Patients with or without insurance whose pre-tax household income is less than 220 percent of the federal poverty guidelines before taxes are eligible for a 100 percent discount. Patients earning between 221 and 400 percent are eligible for a discount on a sliding scale:

Pre-Tax Income as Percent of Federal Poverty Guidelines	Percent of Discount
221-240%	90%
241-260%	80%
261-280%	70%
281-300%	60%
301-320%	50%
321-340%	40%
341-360%	30%
361-400%	20%

“Household income” includes all pre-tax income however derived for all persons 18 years old and over who reside in a household.

**(3) Documentation**

In order to verify household income and assets, the hospital requires the following documents for all household members 18 and older:

- Copies of the most recent 90 days of payroll stubs, Social Security checks, or unemployment checks.

- Copy of the previous year’s tax return (IRS Form 1040 and Oregon Form 40 only; for self-employed filers we also need Schedule C).
- Copies of current bank or trust fund statements.
- Current mortgage and property tax statements for real estate other than the primary residence.
- In the absence of income, a letter indicating how persons with no income are meeting their day-to-day basic living needs.

**(4) Relationship of the uninsured discount to the financial assistance discount**

Uninsured patients are entitled to a 20 percent uninsured discount. This discount is always primary and will be applied before any financial assistance is determined. However, this discount is reversed either if:

- The patient has insurance.
- The patient qualifies for a financial assistance discount. In that case, (1) the 20 percent uninsured discount is replaced with a 20 percent financial assistance discount; (2) the sliding scale discount is applied to the account on top of the 20 percent discount.

Insured patients can require financial assistance just as much as uninsured patients do. Willamette Falls Hospital’s sliding scale financial assistance program is therefore open equally to insured and uninsured patients. However, insured patients are not entitled to the 20 percent uninsured discount since the terms of their insurance policy already grant them a substantial discount from our prices.

**(5) Duration of financial assistance**

Once granted, financial assistance will cover all household members for 6 months beginning with the date the application was received by Willamette Falls Hospital. Existing balances will be included as long as there is no final court judgment against them.

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Michael MARTINEZ  
Director of Revenue Cycle

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Date

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Tim BLANCHARD  
Vice President of Finance

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Date