Skagit Regional Health Financial Assistance/Sliding Fee Scale

Purpose

Skagit Regional Health is committed to providing health care services to all persons in need of medically necessary care regardless of ability to pay. Consistent with our mission and applicable law, the following Financial Assistance Policy sets forth criteria for Skagit Regional Health to provide Financial Assistance to eligible patients.

Policy

Skagit Regional Health provides notice of its Financial Assistance (charity care) program and will make a good faith effort to ensure information is made available to our patients regarding its availability. Skagit Regional Health (Inpatient and hospital-based outpatient clinics/facilities) will post signs in Registration, Patient Financial Counseling and Emergency Departments of the availability of this program. This policy is intended to ensure that eligible patients receive appropriate hospital-based medical services regardless of their ability to pay. Financial Assistance will be granted to all eligible persons regardless of race, color, sex, religion, age, sexual orientation, gender identity, gender expression or national origin. In order to protect the integrity of operations and fulfill this commitment, the following criteria for the provision of Financial Assistance, consistent with the requirements of the Washington Administrative Code (WAC), Chapter 246-453, are established. The criteria will assist staff in making consistent and objective decisions regarding eligibility for Financial Assistance, while ensuring the maintenance of a sound financial position for the organization.

Definitions

1. Financial Assistance: Means medically necessary hospital health care rendered to eligible person(s) when Third-Party Coverage, if any, has been exhausted, to the extent that the person is unable to pay for the care, or to pay deductible or coinsurance amounts required by a third-party, based on criteria in this policy.
2. Third-Party Coverage: Means an obligation on the part of an insurance company, health care services contractor, health maintenance organization, group health plan, government program (Medicare, Medicaid or state-funded Medical Assistance programs, workers compensation, veteran benefits), tribal health benefits or health care sharing ministry as defined in 26 U.S.C. Sec. 5000A, to pay for care of covered patients and services, and may include settlements, judgments or awards actually received related to the negligent acts of others (for example: auto accidents or personal injuries) which have resulted in the medical condition for which the patient has received hospital health care services.
3. Appropriate Hospital-Based Medical Services: Means those hospital services which are reasonably calculated to diagnose, correct, cure, alleviate or prevent the worsening of conditions that endanger life, or cause suffering or pain, or result in illness or infirmity, or threatens to cause or aggravate a handicap, or cause physical deformity or malfunction and there is no other equally effective more conservative or substantially less costly course of treatment available or suitable for the person requesting the service. For purpose of this section, "course of treatment" may include mere observation or, where appropriate, no treatment at all.

4. Emergency Medical Condition: Means a medical condition manifesting itself by acute symptoms of sufficient severity, including severe pain, such that the absence of immediate medical attention could reasonably be expected to result in:
    a. Placing the health of the individual (or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy.
    b. Serious impairment of bodily functions.
    c. Serious dysfunction of any bodily organ or part.
    d. With respect to a pregnant woman who is having contractions the term shall mean:
        i. That there is inadequate time to affect a safe transfer to another clinic before delivery or that transfer may pose a threat to the health or safety of the woman or the unborn child.
5. Income means total cash receipts before taxes derived from wages and salaries, welfare payments, social security payments, strike benefits, unemployment or disability benefits, child support, alimony, and net earnings from business and investment activities paid to the individual. This also includes pension or retirement account distributions, interest, dividends, rents, royalties, income from estates and trusts. Assets will be excluded within this consideration.
6. Family means a group of two or more persons related by birth, marriage, or adoption who live together, all such related persons are considered as members of the one family.
7. Family Income means the income, as described above, of all family members, as described above, residing in the same household. Income from non-family members or room-mates is not considered.

Communications to the Public

The Skagit Regional Health Financial Assistance policy shall be made publicly available through the following methods:

1. A notice advising patients that Skagit Regional Health provides Financial Assistance will be posted in key public areas of the hospital, including Admissions and/or Registration, the Emergency Department, Urgent Care, hospital-based clinics and financial service or billing areas where accessible to patients.
2. Notices in all languages spoken by more than 10 percent of the population in Skagit Regional Health's service area advising patients of the availability of Financial Assistance will be posted in key public areas of the hospital, including Admissions and/or Registration, the Emergency Department, Billing and Finance Services.
3. By telephone: 360-814-7575
    a. Skagit Regional Clinics
    b. Skagit Valley Hospital
    c. Cascade Valley Hospital
4. Written information about the Financial Assistance policy shall be made available to any person who requests the information in person, online via MyChart, via mail or email, free of charge.
5. In person at any Skagit Regional Health Location
6. On our website at: https://www.skagitregionalhealth.org/for-patients/finance-and-billing-information (which includes application and Financial Assistance Discount Table).

7. Skagit Regional Health shall train front-line staff to answer Financial Assistance inquiries effectively or will direct such inquiries to the Financial Counselors or Patient Financial Services Customer Service Department (360) 814-7575.

Covered Services

1. Appropriate hospital-based medical services
2. Professional fees incurred as part of an appropriate hospital-based medical service
3. Services for Emergency Medical Conditions

Eligibility Criteria

All services as defined in Sections 1, 2 and 3 above, which are not covered by a third party payment source or unpaid patient balances shall be considered for Financial Assistance. The guidelines used as criteria will include but not be limited to the following:

1. Persons eligible for Financial Assistance will be comprised of those deemed to have undue financial hardships, considering income, resources and obligations as determined by Skagit Regional Health, that make them unable to pay for all or a portion of their medical care. Such consideration will include a review of annual gross income as calculated for the relevant time period to the date of service, family size, and expenses specific to each Financial Assistance request. If income, at time of application is verified to be lower than at time of service, the lesser of the two shall be used for the determination.
2. An eligible applicant found to have an adjusted family income equal to or less than 200% of the then current federal poverty level will be granted Financial Assistance equal to the full amount of hospital charges for appropriate hospital-based medical services. The following Financial Assistance Discount Table shall be used to determine the patient responsibility amount for patients with income levels 201% up to 500% of the current federal poverty level. A copy of the Financial Assistance Discount Table is available in the Business Office and on the Skagit Regional Health website: https://www.skagitregionalhealth.org/for-patients/finance-and-billing-information. The responsible party's financial obligation which remains after the application of Financial Assistance may be payable in monthly installments over a reasonable period of time, as negotiated between Skagit Regional Health and the responsible party.
3. Prima Facia Write-Offs: In the event that the responsible party's identification as an indigent person is obvious to Skagit Regional Health personnel, and Skagit Regional Health can establish that the applicant's income is within the range of eligibility, Skagit Regional Health may grant Financial Assistance based solely on the initial determination. In such cases, Skagit Regional Health is not required to complete full verification or documentation of any request.
4. Exceptions to this policy may be considered on a case-by-case basis due to extraordinary circumstances. Exceptions must be of a more generous nature than the standard allowances and for the financial benefit of both the patient and the organization.
5. Extraordinary Life Circumstances may include:
    A. Persons Experiencing Homelessness – a person experiencing homelessness is an individual who currently has no permanent place of residence and may depend on public assistance. Such individuals will be eligible for Financial Assistance, even if they are unable to provide the documentation required for the Financial Assistance application.

B. Deceased Patients – The charges incurred by a patient who expires may be considered for Financial Assistance. For the purposes of the application, the deceased patient will count as a family member. The patient will not be eligible for Financial Assistance until the Estate is settled.

C. Persons Who Are Incarcerated – Responsible Party who is incarcerated may be considered eligible for Financial Assistance in the event the State or County has made the determination that they are not responsible for the charges and the person who is incarcerated is responsible for the bill. Charges incurred while in custody are usually paid through the Law Enforcement Agency and would not qualify for Financial Assistance.

D. Catastrophic Determinations – Skagit Regional Health will grant Financial Assistance at its discretion to grant additional assistance based on the responsible party's circumstances or in the event of a qualifying catastrophic medical expense. In the event of a catastrophic medical event causing financial hardship, the responsible party should submit a written request describing the situation. Catastrophic Financial Assistance will be granted on a case-by-case basis and approved by the Director or Manager of the Patient Financial Services team.

Eligibility Determination

To qualify for Financial Assistance, the patient and/or guarantor must fully cooperate with Skagit Regional Health to explore and apply for all resources that do not require the patient to pay premiums. Skagit Regional Health will make an initial determination of eligibility based on verbal or written application for Financial Assistance. Pending final eligibility determination, Skagit Regional Health will not initiate collection efforts or requests for deposits, provided the responsible party is cooperative with the Skagit Regional Health efforts to reach a determination of sponsorship status, including return of applications and documentation within fourteen (14) calendar days of receipt, or such time that is medically and reasonably feasible, for patients to secure and present same.

1. Skagit Regional Health shall use an application process to determine initial interest in and qualification for Financial Assistance. Should patients choose not to apply for Financial Assistance, they shall not be considered for Financial Assistance unless other circumstances or intent become known to Skagit Regional Health.

2. As a part of the application process to determine eligibility for Financial Assistance, Skagit Regional Health will query as to whether a patient or their guarantor meets the criteria for health care coverage under medical assistance programs under chapter 74.09 RCW or the Washington Health Benefit Exchange.

3. If information in the application indicates that the patient or their guarantor is eligible for such coverage, Skagit Regional Health will assist the patient or their guarantor in applying as follows:

    A. Financial Counselors will screen all Inpatient and Emergency Department patients without insurance coverage, as well as any patient referred for screening by scheduling departments, social workers, physicians or other providers, community members and any other entities that contact Skagit Regional Health requesting assistance.

    B. Financial Counselors will communicate with patients via phone, mail or in person to screen.

C. Financial Counselors will provide applications to patients and supply information directly to Washington Medicaid to assist patients applying for Washington Apple Health Medicaid Managed Plans (HCA).

4. In providing assistance with the application process, Skagit Regional Health will take into account any physical, mental, intellectual, sensory deficiencies or language barriers which may hinder either the patient or their guarantor from complying with the application procedures and will not impose procedures on the patient or guarantor that would constitute an unreasonable burden.
5. If the patient or guarantor fails to make reasonable efforts to cooperate with Skagit Regional Health in applying for coverage under chapter 74.09 RCW or the Washington Health Benefit Exchange, Skagit Regional Health is not obligated to provide Financial Assistance to such patient.
6. If a patient or their guarantor is obviously, or categorically ineligible, or has been deemed ineligible for coverage through medical assistance programs under chapter 74.09 RCW or the Washington Health Benefit Exchange in the prior 12 months, Skagit Regional Health will not require the patient or their guarantor to apply for such coverage.

7. Timing of Income Determinations

Annual Family Income of the applicant will be determined as of the time the appropriate hospital-based medical services were provided, or at the time of application for Financial Assistance if the application is made within two years of the time of the appropriate hospital-based services were provided, the applicant has been making good faith efforts towards payment for the services rendered, and the applicant demonstrates eligibility for Financial Assistance.

Final Determination

Skagit Regional Health will exercise the following options in making the final determination for Financial Assistance:

1. Financial Assistance forms shall be furnished to patients when Financial Assistance is requested, when indicated, or when financial screening indicates potential need. Unless otherwise provided in this Policy, all applications whether initiated by the patient or Skagit Regional Health should be accompanied by documentation to verify income amounts indicated on the application form. One or more of the following types of documentation may be acceptable for purposes of verifying income:
    a. W2 withholding statements for all employment during the relevant time period.
    b. Pay stubs from all employment during the relevant time period specific to the date of service.
    c. An income tax return from the most recently filed calendar year for the relevant time period.
    d. Forms approving or denying eligibility for Medicaid and/or state funded medical assistance.
    e. Forms approving or denying unemployment compensation.
    f. Written statements from employers or welfare agencies.
    g. In the event that the responsible party is not able to provide any of the documentation described above, Skagit Regional Health shall rely upon written

and signed statements from the responsible party for making a final determination of eligibility for classification as an indigent person.

2. Patients will be asked to provide verification or eligibility for Medicaid and/or state-funded Medical Assistance. During the initial request period, Skagit Regional Health may pursue other sources of funding, including Medicaid.
    a. Income shall be annualized from the date of application based upon documentation provided and upon verbal information provided by the patient for the year(s) service occurred. The process will be determined by Skagit Regional Health and will take into consideration temporary increases and/or decreases of income.
    b. Financial Assistance, if granted, is valid for one hundred eighty (180) days from the date of final determination and a new application will be required after such time.
3. Applicants will be notified within fourteen (14) calendar days of the final decision approving or denying their Financial Assistance application. In the case of approvals, parties will be notified of the amount that will be covered.
4. In the event that a responsible party pays a portion or all of the charges related to appropriate hospital-based medical care services, and is subsequently found to qualify for Financial Assistance at the time that services were provided, any payments in excess of the amount determined to be appropriate shall be refunded to the patient within thirty (30) days of achieving the Financial Assistance designation.

Denial

1. When an application for Financial Assistance has been denied, the responsible party shall receive a written notice of the denial which includes:
    a. The reason or reasons for the denial.
    b. The date of the decision.
    c. Instructions for appeal or reconsideration.
2. When the applicant does not provide requested information, and there is not enough information available for Skagit Regional Health to determine eligibility, the denial notice shall include:
    a. A description of the information that was requested and not provided, including the date the information was requested.
    b. A statement that eligibility cannot be established based on information available to Skagit Regional Health.
    c. Eligibility will be determined if, within fourteen (14) days from the date of the denial notice, the applicant provides all specified information previously requested but not provided.
3. The patient and/or guarantor may appeal the determination of non-eligibility for Financial Assistance by providing additional verification or documentation in support of their application to Skagit Regional Health within thirty (30) days of receipt of the denial.
4. The Revenue Cycle Director and/or Financial Assistance Board will review all appeals. The Financial Assistance Board will consist of the Chief Financial Officer or designee, the Medical Director or designee, and the Revenue Cycle Director. If this review affirms the previous denial of Financial Assistance, written notification will be sent to the patient and/or guarantor and the Washington State Department of Health,

and a copy of the application materials will be sent to the Washington State Department of Health in accordance with applicable regulations.

5. During the period of appeal for Financial Assistance, collection efforts will cease until the appeal is finalized.
6. If a patient has been found eligible for Financial Assistance and continues receiving services for an extended period of time without completing a new application, Skagit Regional Health shall re-evaluate the patient's eligibility for Financial Assistance for a specific date or short-term approval period and/or every one hundred eighty (180) days to confirm that the patient remains eligible. Skagit Regional Health may require the responsible party to submit a new Financial Assistance application and documentation.

Documentation and Records

Confidentiality: All information relating to the application will be kept confidential. Copies of documents that support the application will be kept with the application form. Documents pertaining to Financial Assistance shall be retained for six (6) years.

Staff Training Requirements

Skagit Regional Health has established a standardized training program on its Financial Assistance policy and the use of interpreter services to assist person with limited English proficiency and non-English-speaking persons in understanding information about its Financial Assistance policy. Skagit Regional Health will provide training to front-line staff who work in registration, admissions, billing and any other appropriate staff to answer Financial Assistance questions effectively, obtain any necessary interpreter services, and direct inquiries to the appropriate department in a timely manner. At least annually, SRH will require all employees to take a computer-based learning course regarding the availability of Financial Assistance and how to advise patients to access same.

References

Chapter 70.170 RCW – Health Data and Charity Care

Chapter 246-453 WAC - Hospital Charity Care