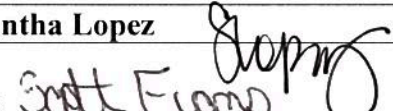


SAN LUIS VALLEY HEALTH
REVENUE CYCLE
Charity Care Program Policy & Procedure

Department: Patient Access

Doc#: CHAR - 0001

Effective: June 1, 2015

Procedure Title: Charity Care Program Policy and Procedure	
Procedure Author: Donna Wehe	
Revised by: Samantha Lopez	Date: 7/1/2018
Signature of Director/Designee: 	

I. Purpose

To provide financial assistance to patients who are uninsured and who are financially eligible to receive discounts for specified medical expenses through the SLV Health Charity Care Program.

Disclaimer

SLV Health reserves the right to exercise discretion with the following policy, including definitions and conditions of eligibility. The discounts are covered under the Community Health Services Program and may be discontinued at the discretion of SLV Health.

II. Policy

As a non-profit, charitable, community-based healthcare provider, SLV Health will provide discounts to patients who have income that is under 250% of the Federal Poverty Level to ensure that financial barriers to medically necessary services are minimized. Charity Care is retroactive up to 240 days from discharge.

This charitable discount program will not be used in combination with any other private or public insurance or other medical benefit assistance such as Medicaid, CICP or Medicare. Valley-Wide Health Systems' patients who qualify for Sliding Fee discount program will be required to apply for SLV Health's Charity Care Program.

Patients with CICP only coverage may be covered under Charity Care for Outpatient Surgical Services. Eligibility for Outpatient Surgical Services is honored for a one-time use for the procedure approved.

Patients who are incarcerated as defined by Colorado Medicaid will not be eligible.
<https://www.colorado.gov/pacific/hcpf/medicaid-and-criminal-justice-involved-populations>

Discounts are offered based upon family/household size and annual income. A sliding fee and co-payment schedule is used to calculate the basic discount and is updated each year using the Federal Poverty Guidelines as issued each spring by the U.S. Department of Health and Human Services (Attachment A). Once approved, the discount will be honored for 12 months.

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after which the patient must reapply. Patients who are determined to be ineligible may reapply in three months or file an appeal with the Director of the Revenue Cycle.

Scope of Coverage:

Eligible patients must reside in one of the six counties of the San Luis Valley. Temporary residents relocating to the SLV for the sole purpose of receiving charitable medical services are not eligible.

All care rendered by an eligible SLV Health Rural Health Clinic may be considered through the SLV Health Charity Care Co-Payment Guide including past dates of service.

Specialty care providers, such as Oncology, Cardiology, and Neurology, will be offered on a case by case basis with emphasis on the urgent or emergent need of the visit.

SLV Health provides care to all patients and does not discriminate against any person on the basis of race, color, national origin, disability, or age in admission, treatment, or participation in its programs, services and activities.

Charity Care Discounts may be applied to certain cases where out of state Medicaid patients have incurred an Emergency Room and/or Inpatient visit and the finance/billing departments make a determination to not pursue a contract with that state.

Eligible Services

Medical: Hospital Facility & Professional Fees; Outpatient PT, OT & ST; ENT, Pathology, Family Practice, Internal Medicine, Pediatrics, OB/GYN, Orthopedics, General Surgery, and Sleep Study.

Lab & X-ray: The discount is applied to in-house laboratory and x-ray services.

Ineligible Services

This policy does not apply to charges for services incurred from other providers whose services are coincident to those provided by SLVRMC. Reference laboratory tests and consulting radiology interpretations are excluded.

Excluded services include Allergy testing, Family Practice in Alamosa Clinics, Chiropractic, Durable Medical Equipment, Contraceptives, Genetic testing, Podiatry, Ophthalmology, and Physiatry.

Specialty care providers, such as Oncology, Cardiology, and Neurology, will be considered on the sliding fee schedule and offered on a case by case basis, with emphasis on the urgent or emergent need of the visit.

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III. Procedure

- A. The financial eligibility process often begins at patient registration. Any patient who is identified as uninsured should be referred to a Financial Counselor for assistance.
- B. Financial Counselors determine the patient's eligibility and verify that the patient does not qualify for other insurance or discount programs.
- C. Financial Counselors assign the appropriate discount code, ensure the patient understands the discount program and enter the information into the SLV Health registration system.
- D. Financial Counselors advise the Patient Access Manager of the application and approval in order for the discount to be applied.
- E. Co-payments are expected at time of service.

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Attachment A