

## **Charity Care Policy**

### **Policy**

Clinton County Hospital's mission is to provide the highest quality of care possible in a safe and secure environment by a caring and competent healthcare team. As part of that mission, Clinton Co. Hospital serves patients in difficult financial circumstances and offers financial assistance to those in need of medical services. This policy serves to establish and ensure a fair and consistent method for the review and completion of requests for charitable medical services to patients in need.

### **Procedure**

Business Office staff are responsible for the following actions:

A Clinton Co. Hospital Financial Counselor or designated business office representative will review individual cases and make a determination of financial assistance that may be offered.

Clinton County Hospital determines the need for financial assistance by reviewing insurance coverage, other sources of payment, patient's historical financial profile and current financial situation. This allows for a fair and objective way to assist patients who are experiencing financial hardship. Partial and/or full charity care will be granted based on the individual's ability to pay. Eligible individuals include patients who do not have insurance and patients who have insurance but are underinsured. Patients must cooperate with any insurance claim submission and exhaust their insurance or potential insurance coverage before becoming eligible for financial assistance.

Other factors affecting eligibility are:

#### **Income**

1. 200% of the most recent Federal Poverty Income Guidelines will be the minimum level for 100% (full) charity write-off.
2. 201%-400% of the most recent Federal Poverty Guidelines will be eligible for a 50% discount.
3. Patients with an income over 400% of the most recent Federal Poverty Income Guidelines will be eligible for some degree of charity in special circumstances only.

#### **Assets**

Savings and/or checking accounts, real estate, investments, etc.

## Expenses

Review of monthly living expenses including medical, utility, food, clothing, etc.

## Considerations

Eligibility is contingent on patient cooperation with the application process and submission of all documents and information necessary for Clinton County Hospital to determine the level of financial assistance that is appropriate.

## Method of Applying for Financial Assistance

Patients can apply for financial assistance either before receiving services or after the billing and collection process has begun. Patients or their representative can obtain an application by calling the Business Office at 606-387-6421. All patients/guarantors who receive a financial assistance application must complete and return the application within ten working days, along with the following documents:

- Proof of completion of any available medical assistance program application
- Proof of household income (pay stubs for past 90 days)
- A copy of 3 most recent bank statements from all banking institutions
- A copy of the 2 most recent tax returns

**Clinton County Hospital reserves the right to request additional documentation as the need may arise.**

A representative from the Business Office will consult the financial assistance authorization guidelines and if necessary present the financial statement to the appropriate person/committee for consideration. Reasons for denial include, but are not limited to:

- Sufficient income.
- Sufficient assets
- Patient is uncooperative or unresponsive to documentation requests
- Pending insurance claim

Once a determination has been made, a letter will be sent to the applicant informing them of the decision.

## Emergency Services

Clinton County Hospital provides emergency care to all patients regardless of their ability to pay. Emergency room patients may be classified as “charity” if they do not have a job, mailing address, residence, or insurance. Consideration is also given to classifying emergency room patients as charity if they do not provide adequate information as to their financial status. In many cases these patients have limited resources to cover the cost of their care. Clinton County Hospital will not consider bad debt, contractual allowances, public programs, perceived underpayments for operations, professional courtesy discounts,

community service programs, or employment status as a means to determine financial assistance. Clinton County Hospital is committed to upholding the multiple federal and state laws that preclude discrimination on any classification protected by law.

## **Collection Activity**

Clinton County Hospital will not engage in extraordinary collection activities before it makes a reasonable effort to determine whether a patient is eligible for financial assistance. If a collection agency identifies a patient as meeting Clinton County Hospital's financial assistance criteria, the patient's account may be considered for financial assistance. Collection activity will be suspended on such an account and it will be reviewed. If the entire account balance is adjusted, the account will be returned to Clinton County Hospital. If a partial adjustment is made, the patient fails to cooperate with the financial assistance process, or if the patient is not eligible, collection activity will resume. Patients who are deceased with no known resources to pay will have their account written-off.

## **Confidentiality**

Clinton County Hospital will uphold the confidentiality and dignity of each patient and will meet all HIPAA requirements for handling personal health information.

This policy will be effective once approved by the Board of Directors and will be reviewed annually.  
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