

KIDSPEACE POLICY

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Title: Charity Care	Chapter: Corporate
Policy Number: CORP 815	Subsection: Finance
Initiating Authority: Kathryn Sena, Manager Patient	Sumersedes: FI-CORP.B.15
Accounts	
Origination Date: January 22, 2007	Implementation Date: February 4, 2016
Approving Authority: Michael Callan, Chief Financial Officer (CFO)	

I. POLICY STATEMENT

II. PURPOSE

This Charity Care Policy applies to un-funded/underinsured and under-funded/under-insured clients who participate in the process to evaluate their ability to pay for services. The corporation will employ the Federal poverty guidelines published in the Federal Unaccompanied Care and Unaccompanied Services.

III. SCOPE

This Charity Care Policy applies to all clients based on the U.S. Department of Health and Human Services.

Administrative Authority: This policy will be administered by the Chief Financial Officer (CFO).

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IV. GENERAL

Definitions:

Provisions:

All applicants will be screened without prejudice and without discrimination

Information provided by clients and their families to obtain Medical Assistance and consideration for Charity Care will be used for that purpose only and will remain confidential.

References:

Copies of the following documents can be obtained from any member of the Patient Accounting or the Admissions Department:

Attachment A: Application for Reduced Cost Care

Attachment B: Income Guidelines & Sliding Fee Scale for Reduced Cost Care;

Attachment C: Determination Notice for Reduced Cost Care;

V. POLICY

A. Program Admissions and/or other corporate associates will assist in funded (e.g. lock insurance) and/or under-funded (e.g. under insured) clients with payment processing of their care bills.

B. Program and/or Admission associates will make a determination on a client's lack of resources, funding and/or change of funding during their placement or continuation of care medical. (See Appendix B for details.)

C. Client responsibility will be assessed based on the client's financial situation. The client's financial situation will be evaluated and consideration for reduced cost care will be made.

D. Program and/or Admission associates will communicate to the parent and/or legal guardian information about the existence and option of Charity Care assistance at KidsPeace.

1. Program and/or Admission associates will forward the Application For Reduced Cost Care

E. The Finance Department will determine if client qualifies for reduced cost care and approves, partially approves, or denies reduced cost care depending upon the criteria stated in the Reduced Cost Care Guidelines. The Finance Department will apply the Guidelines to client balances prior to analyzing the Guidelines.

B. The Finance Department will determine if client qualifies for reduced cost care and approves, partially approves, or denies reduced cost care depending upon the criteria stated in the Reduced Cost Care Guidelines. The Finance Department will apply the Guidelines to client balances prior to analyzing the Guidelines.

Once eligibility is determined, all the client's outstanding balances become the client's responsibility. Payment forgiveness. In some cases, the entire patient responsibility may be forgiven.

2. Clients whose gross income is greater than 400% of the Federal Poverty Level and who do not have documented support of hardship or demonstrate other unusual circumstances, may have their charges considered for reduction.

3. All approved Charity Care applications will be reviewed Semi-annually for continuation of benefits.

4. In cases of documented extreme hardship, and upon the approval of KidsPeace's Executive Vice President and CEO, an amount less than that calculated per the guidelines appearing on Payment Forgiveness Guidelines, or less than the client responsibility amount (for clients whose gross income is more than 400% of FPL), may be accepted by the Corporation in satisfaction of a client's obligation.

Accounts for all funded and/or under-funded clients qualifying for uncompensated Care/Reduced Cost Care will be written-off using the appropriate charge master code write-off code by the Patient Accounting Department.

The Executive Vice President and CEO and Patient Accounts Manager will counter sign the