



Origination: 8/1/2017
Last Reviewed: N/A
Last Revised: 4/17/2018
Next Review: 1 year after approval
Owner: Tiffany Huston: PFS Manager
Policy Area: Revenue Cycle - Patient
Financial Services

Reference Tags:

Financial Assistance Program, RC-08-DC

Replaces Policy: Community Care Financial Assistance Policy MC-01-DC

Purpose:

To establish guidelines for the provision of a Financial Assistance Program (FAP) policy to the patients served by Door County Medical Center (DCMC).

Governance:

The FAP is administered by the Revenue Cycle Division.

Policy Statements:

It is the policy of Door County Medical Center to provide medically necessary health care services to people in the communities it serves, regardless of their ability to pay. The FAP is offered based upon the patient's inability to pay and to patients who are uninsured, underinsured or medically indigent. Financial assistance is not available for "non-medically necessary procedures and treatments;" i.e., non-emergent procedures and treatments deemed elective pursuant to federal healthcare program regulations and published guidelines.

The FAP works in collaboration with other financial assistance programs, both public and private. This is to ensure holistic wellness of patients by facilitating knowledge of available services and programs for health, while practicing good stewardship of funds. All applicants must apply for Medicaid, Health Insurance Exchange plans and other programs that might be available to them prior to becoming eligible for this program. Key criteria utilized to determine eligibility for this FAP includes family size, federal poverty income guidelines and available assets.

In accordance with DCMC's values, associates will treat patients and family members with compassion, dignity and respect at all times during the FAP process. All patient and proprietary information is considered confidential and protected by law. DCMC will safeguard the privacy and security of patient protected health information. Access to patient and/or proprietary information is determined by a "need-to-know" and as minimum necessary to carry out duties or assignments.

FAP patients must complete an application form and supply all necessary information required to make a determination for program eligibility. The application form will be subject to periodic verification of the individual or family's current financial status. Patients may appeal FAP decisions (refer to item #12 under Policy below for more detail).

All Door County Medical Center locations will report FAP information as required to the Finance Department. Financial assistance information and reports shall not include amounts that are considered to be bad debt or contractual discounts.

Policy:

1. If, during the course of the patient registration process, care encounter, treatment, upon discharge or during billing process, it becomes evident that a patient may need financial assistance, the patient shall be referred to the organization's FAP. Patients may be identified as needing financial assistance at any time during the course of an encounter. A referral for consideration of the FAP can be initiated by any member of Door County Medical Center's workforce, including medical staff members, who become aware of the patient's potential need for financial assistance. In addition, patient's guarantor or responsible party may make request for FAP consideration.
2. FAP information (the application and list of required documents to accompany application) will be provided to any patient identified as FAP "eligible" or upon request. Patients may obtain an application by visiting any location, by mail or online. Financial need may be determined in accordance with procedures that involve an individual assessment of financial need and may

- a. Include a screening process
 - b. Include an application process, in which the patient or patient's guarantor are required to provide personal, financial and other information and documentation. This application process may be completed with the assistance of a DCMC representative or by mail.
 - c. Include the use of external publicly available data sources that provide information on a patient's or a patient's guarantor's ability to pay.
 - d. Door County Medical Center may choose to waive such conditions or criteria for the FAP in situations where the patient/guarantor is not capable of meeting these requirements per management approval (refer to section 11 for more detail).
3. Door County Medical Center recognizes that an individual and/or family's income situation may vary over time. As a result, DCMC will periodically re-verify eligibility for the FAP.
 4. The FAP is not available for non-medically necessary services or services that are deemed to be non-reimbursable by traditional insurance carriers and government payers. Medically necessary services are defined as activities that may be justified as reasonable, necessary and/or appropriate based on evidence based medical standards of care. Exceptions may be considered on an individual basis and will be approved by management in consultation with medical staff and/or the ethics committee..
 5. In compliance with EMTALA, all emergency medical services provided in an emergency room setting are eligible under this policy. DCMC will provide, without discrimination, care for emergency medical conditions to individuals regardless of whether they are financial assistance eligible.
 6. Eligibility for FAP will be considered for those individuals who are uninsured, underinsured, and ineligible for any government health care benefit program and who are unable to pay for their care, based upon a determination of financial need in accordance with this policy. The granting of financial assistance shall be based on an individualized determination of financial need and shall not take into account age, gender, race, social or immigrant status, sexual orientation or religious affiliation.
Specific Eligibility Criteria:
 - a. Patients eligible for FAP must be a resident in the communities we serve and have established care with a provider within the DCMC system. Special cases may be considered in the event the services are unplanned such as in emergent or urgent situations.
 - b. Individual or family income, which may take into account family size, geographic area and other pertinent factors.
 - c. Individual or family net worth, which considers liquid and non-liquid assets owned, less liabilities and claims against secured assets. Net worth may be used to determine eligibility or whether the assets might be considered as a source of payment.
 - d. Other financial obligations, such as living expenses and other items of reasonable and necessary nature.
 - e. Amount and frequency of healthcare bills may be considered.
 - f. Other financial resources available to patients, such as an insurance plan through the Health Insurance Exchange, Medicaid or other public assistance programs, may affect the determination of assistance.
 - g. Patients receiving home health care services must meet the definition of home bound or the home must be the best place for service to be provided.
 - h. Have an outstanding balance due of \$250 or greater.
 7. Amounts generally billed to patients will be based on a sliding fee scale in accordance with financial need, as determined in the reference to the Federal Poverty Levels in effect at the time of determination. After a patient has been determined to be eligible for financial assistance, DCMC will make a reasonable effort to stop billing the patient for applicable services up to approval date based on undiscounted gross charges. It is the patient's responsibility to notify DCMC of new accounts that need to be considered for adjustment.
 - a. Patients whose family income and assets is at or below 200% of the Federal Poverty Level (FPL) in effect at the time of determination are eligible to receive free care.
 - b. Patients whose family income and assets is above 200% but not more than 400% of the FPL are eligible to receive services at a sliding fee scale.
 - c. Patients whose family income and assets is above 400% of the FPL may be eligible to receive discounted rates on a case-by-case basis at the discretion of DCMC.
 - d. Insured patients or uninsured patients who are not eligible for financial assistance and the patient's responsibility

exceed 25% of the annual gross family income may qualify for a catastrophic financial assistance adjustment.

e. Uninsured patients will receive a discount of 15% of gross charges.

8. Communication of the FAP available from DCMC shall be disseminated by various means, which may include publication of notices on patient billing statement, brochures located within clinics, emergency departments, urgent care centers, admitting and registration departments, patient financial services or other business associates involved in patient billing process. The FAP policy and complete application shall also be published on DCMC Website.
9. It is an expectation that the patient/guarantor will cooperate and supply all necessary information required to make a determination for financial assistance eligibility. This includes application to any program for which they may be eligible prior to their evaluation for the DCMC funded financial assistance program. Failure to do so may result in application being denied.
10. In the event patient or responsible party is unable to apply for the FAP, DCMC may use presumptive eligibility to make a determination of the patient's eligibility.
11. The final determination for FAP shall be made within 30 days of receipt of the completed application, required supplemental documents and determination of other program(s) eligibility. The patient or guarantor will be notified in writing of the final determination. The patients or guarantor shall also be notified if a determination is delayed pending an incomplete application or if additional information is needed.
12. The patient may request an appeal in writing following final determination or denial of FAP. The DCMC Appeals Committee will review all appeals requests within thirty (30) days of receipt. The patient or guarantor will be notified in writing of final determination.
13. DCMC will make reasonable effort to determine FAP eligibility before considering extraordinary collection actions. In general, reasonable efforts include providing notice of the FAP during the notification period ending 120 days after the date of the first billing statement. DCMC will accept and process a FAP application an additional 120 days after the initial 120 day notification period, for a total application period of 240 days. It is the guarantor's responsibility to provide a correct mailing address at the time of service or upon moving. If an account does not have a valid address, the determination for "reasonable effort" will have been made.
14. In the event a financial assistance application and/or payment are not received, DCMC may proceed with extraordinary collection actions with 30 days prior notice as detailed in the Credit and Collections Policy. This could include sending collection letters or referral of account to a collection agency. The collection agency will continue collection efforts which may also include credit bureau reporting or further legal action.

Related Policies/Position Statements/Other Source Documents:

- HFMA Patient Friendly Billing Practices
- ACA Regulations Code Section 501 (r)
- Federal Poverty Guidelines
- Credit and Collections Policy PFS-4

Definitions:

- **Catastrophic illness or injury** is defined a life-threatening condition that requires lengthy hospitalization, extremely expensive therapies or other healthcare that would deplete a family's financial resources.
- **Charity Care** is defined as healthcare services that have been or will be provided but are never expected to result in cash inflow. Charity care results from policy to provide healthcare services free or at a discount to individuals who meet established criteria.
- **Federal Poverty Threshold Guidelines** are published annually by the U.S. Census Bureau. The guidelines are used as a basis for determining financial assistance.
- **Income** is defined as all sources of earnings and may include and is not limited to salaries, wages, unemployment compensation, disability, dividends from investments, etc.
- **Uninsured Patients** are defined as all persons who are uninsured or do not otherwise qualify for any governmental or private program that provides coverage for any of the services rendered.
- **Underinsured Patients** are defined as all persons who have insurance but have an insufficient level of coverage to pay for all healthcare expenses.
- **Emergency Medical Condition or Emergent Care** is defined as a medical condition manifesting itself by acute symptoms of sufficient severity such that the absence of immediate medical attention could reasonably be expected to result in placing health of individual in serious jeopardy, impairment to bodily functions or serious dysfunction of any bodily organ or part.
- **Urgent Care** is defined as a medical condition that does not appear to be life-threatening, but the patient cannot wait

until the next day to see a primary care physician.

- **Medically Necessary** services are defined as health care services that may be justified as reasonable, necessary and/or appropriate based on evidence based medical standards of care.

Providers

Services of the following providers are covered under this policy:

- | |
|----------------------------------------------------------------------------------------------------------------------------------|
| • Binard, Marc P., MD (Hospitalist, Internal Medicine, Door County Medical Center) |
| • Bruno, Michael S., MD (Anesthesiology, Door County Medical Center) |
| • Finck, Martin, MD (Anesthesiology, Door County Medical Center) |
| • Heise, James F., MD (Hospitalist, Internal Medicine, Door County Medical Center) |
| • Matysiak, Brian E., MD (Anesthesiology, Door County Medical Center) |
| • Matysiak, Kristine M., PAC (Physician Assistant, Emergency Medicine, Door County Medical Center) |
| • Palines, Reynaldo V., Jr, MD (Hospitalist, Internal Medicine, Rheumatology, Door County Medical Center) |
| • Renfrew, Donald L., MD (Radiology, Door County Medical Center) |
| • Fergus, Mark A., APNP (Family Nurse Practitioner, Family Medicine, Door County Medical Center Algoma Clinic) |
| • Knipfer, Ellen L., APNP (Nurse Practitioner, Internal Medicine, Door County Medical Center Algoma Clinic) |
| • Allen, Gene T., DDS (General Dentistry, Door County Medical Center Dental Clinic) |
| • Sigl, Patricia A., DDS (General Dentistry, Door County Medical Center Dental Clinic) |
| • Johnson, Rory M., MD (Family Medicine, Door County Medical Center Fish Creek Clinic) |
| • Rebhan, Joseph J., MD (Family Medicine, Door County Medical Center Fish Creek Clinic) |
| • Swain, Holly A., PAC (Physician Assistant, Family Medicine, Door County Medical Center Fish Creek Clinic) |
| • St Jean, Michael R., MD (Surgery, General, Door County Medical Center General Surgery Clinic) |
| • Melarvie, Shaun J., MD (Surgery, General, Door County Medical Center General Surgery Clinic) |
| • Scheer, Kurtis D., MD (Surgery, General, Door County Medical Center General Surgery Clinic) |
| • Welter, Nicole M., APNP (Nurse Practitioner, Family Medicine, Door County Medical Center Southern Door Clinic) |
| • Alzuhn-Hansen, Leslie K., MD (Obstetrics and Gynecology, Door County Medical Center Sturgeon Bay Clinic) |
| • Antonio, Maria Chona S., MD (Family Medicine, Complementary/Holistic Medicine, Door County Medical Center Sturgeon Bay Clinic) |
| • Arnold, John E., MD (Pediatrics, Door County Medical Center Sturgeon Bay Clinic) |
| • Arnold, Phillip B., DO (Family Medicine, Sports Medicine, Door County Medical Center Sturgeon Bay Clinic) |
| • Balestrieri, Patti A., PAC (Physician Assistant, Urgent Care, Family Medicine, Door County Medical Center Sturgeon Bay Clinic) |
| • Board, Paul S., MD (Internal Medicine, Door County Medical Center Sturgeon Bay Clinic) |
| • Bryan, John P., PAC (Physician Assistant, Orthopedic Surgery, Door County Medical Center Sturgeon Bay Clinic) |
| • Craanen, Hannah S., APNP (Nurse Practitioner, Internal Medicine, Door County Medical Center Sturgeon Bay Clinic) |

• Davis, Steven S., MD (Orthopedic Surgery, Door County Medical Center Sturgeon Bay Clinic)
• Dempster, Dorene E., MD (Obstetrics and Gynecology, Door County Medical Center Sturgeon Bay Clinic)
• Derbick, Heidi M., APNP (Nurse Practitioner, Family Medicine, Behavioral Health Specialist, Door County Medical Center Sturgeon Bay Clinic)
• Fogarty, Amy C., MD (Pediatrics, Door County Medical Center Sturgeon Bay Clinic)
• Hecker, Richard L., DPM (Podiatry, Door County Medical Center Sturgeon Bay Clinic)
• Hobart, Paula L., APNP (Nurse Practitioner, Family Medicine, Door County Medical Center Sturgeon Bay Clinic)
• Hogan, Richard A., MD (Internal Medicine, Pulmonary Disease, Sleep Medicine, Door County Medical Center Sturgeon Bay Clinic)
• Kodras, Ronald L., MD (Internal Medicine, Geriatrics, Door County Medical Center Sturgeon Bay Clinic)
• Kurek, Andrzej P., MD (Family Medicine, Sleep Medicine, Door County Medical Center Sturgeon Bay Clinic)
• Martens, Sandra I., MD (Urgent Care, Family Medicine, Door County Medical Center Sturgeon Bay Clinic)
• Michalski, Tomasz J., MD (Family Medicine, Door County Medical Center Sturgeon Bay Clinic)
• Reitz, Kelton J., DO (Internal Medicine, Door County Medical Center Sturgeon Bay Clinic)
• Shutt, Charles B., MD (Obstetrics and Gynecology, Door County Medical Center Sturgeon Bay Clinic)
• Sohns, Ruth A., DNP, APNP (Nurse Practitioner, Internal Medicine, Door County Medical Center Sturgeon Bay Clinic)
• Tomaszewski, Daniel J., MD (Orthopedic Surgery, Door County Medical Center Sturgeon Bay Clinic)
• Ullman Herlache, Holly A., APNP (Nurse Practitioner, Urgent Care, Family Medicine, Door County Medical Center Sturgeon Bay Clinic)
• Johnson-Giese, Barbara L., LCSW (Lic. Clinical Social Worker, Door County Medical Center Sturgeon Bay Clinic)
• Krauel, Callie A., LCSW (Lic. Clinical Social Worker, Door County Medical Center Sturgeon Bay Clinic)
• Lux, Beth A., MD (Family Medicine, Door County Medical Center Washington Island Clinic)
• Wasie, Edward J., APNP (Nurse Practitioner, Family Medicine, Door County Medical Center Washington Island Clinic)
• McCormack, Francis X., MD (Emergency Medicine, Family Medicine, Infinity Health Care)
• Pajek, Emil M., MD (Emergency Medicine, Internal Medicine, Infinity Health Care)
• Wright, Angela C., DO (Emergency Medicine, Infinity Health Care)
• Aldinger, Glenn E., MD (Emergency Medicine, Infinity HealthCare)
• Bardsley, David J., MD (Emergency Medicine, Infinity HealthCare)
• Cantzler, Ryan M., MD (Emergency Medicine, Infinity HealthCare)
• Gorchynsky, George S., MD (Emergency Medicine, Family Medicine, Infinity Healthcare)
• Hilander, Swen J., MD (Emergency Medicine, Infinity Healthcare)
• Kasalajtis, Brian P., MD (Emergency Medicine, Infinity HealthCare)
• Longdon, Charles A., DO (Emergency Medicine, Infinity HealthCare)

- Lovell, Jeffrey H., MD (Emergency Medicine, Family Medicine, Infinity Healthcare)
- Matthews, David P., MD (Emergency Medicine, Infinity HealthCare)
- Naples, Jeremy R., MD (Emergency Medicine, Infinity Healthcare)
- Salmi, Allen W., MD (Emergency Medicine, Infinity HealthCare)
- Teter, Allen L., MD (Emergency Medicine, Surgery, General, Infinity HealthCare)
- Thompson, Christopher C., MD (Emergency Medicine, Infinity Healthcare)
- Pavek, Timothy S., MD (Emergency Medicine, Infinity Healthcare, Inc)
- Stein, Richard S., MD (Emergency Medicine, Family Medicine, Infinity Healthcare, Inc)
- De Frank, Michael R., MD (Emergency Medicine, Infinity Healthcare, Inc.)
- Hellman, Carolyn A., DO (Emergency Medicine, Infinity Healthcare, Inc.)
- Johnson, Kenneth M., MD (Emergency Medicine, Infinity Healthcare, Inc.)
- Matousek, Jan M., DO (Emergency Medicine, Infinity HealthCare, Inc.)
- Stanlaw, Karen A., MD (Emergency Medicine, Infinity Healthcare, Inc.)

The following providers do not honor the DCMC financial assistance policy at this time:

- Affinity Medical Group
- Aurora Medical Center - Oshkosh
- Bay Care Clinic - Neurological Surgeons
- BayCare Clinic
- BayCare Clinic LLP
- BayCare Clinic Oral & Maxillofacial Surg
- BayCare Clinic, LLP
- BayCare Clinic, LTD
- BayCare Health Systems LLC
- BayCare Health Systems, LLC
- Cardiology Associates of Bellin Health
- Clearview Optical, S.C.
- Dentistry by Design
- Door County Eye Associates
- Eagle Hospital Physicians
- Forefront Dermatology
- Green Bay Oncology
- Green Bay Oncology, Ltd.

- Green Bay Oncology, Ltd., St. Vincent
- Neurology Consultants of NE WI, Ltd
- Neuroscience Group
- NuVasive Clinical Services Monitoring
- Peninsula Vision Care
- Prevea Allouez Health Center
- Prevea Behavioral Care - Green Bay
- Prevea Behavioral Care - Sheboygan
- Prevea Clinic
- Prevea Clinic - St. Mary's Hosp. Site
- Prevea Clinic - Webster Site
- Prevea Clinic-West Side
- Prevea Health
- Prevea Health - Allouez
- Prevea Health - St. Mary's
- Radiology Associate of the Fox Valley
- Radiology Associates of Fox Valley
- Radiology Associates of the Fox Valley
- Radiology Association of the Fox Valley
- Wisconsin Colon and Rectal Clinic



Values:

This Policy has been reviewed for support of the Door County Medical Center Values.

Key Words:

Financial assistance, community care, charity, poverty, vulnerable persons

For More Information Contact:

Manager of Patient Financial Services

Responsible Senior Leader:

Chief Financial Officer

Approved by:

Senior Leader Team: 7/25/2017;

Notice:

This information is an accurate state of published Door County Medical Center Policy as of the time of publication. Door County Medical Center adopts the Policy

and recommends that the user always check for the latest version in PolicyStat, before any subsequent use.

Attachments:

No Attachments

Approval Signatures

Approver	Date
Tiffany Huston: PFS Manager	pending

COPY