

## JERICO ROAD COMMUNITY HEALTH CENTER

### Fiscal Policies and Procedures



#### Sliding Fee Discount Program Policy Number: 5.2

Original Effective Date: April 11, 2012  
Reviewed & approved: March 23, 2023

#### Purpose

Jericho Road Community Health Center ("JRCHC") maintains a Sliding Fee Discount Program ("SFDP") for those who receive care at JRCHC but have no or limited means to pay for the services. Regardless of ability to pay, all patients who come to JRCHC are entitled to quality healthcare and financial counseling and assistance. To that end, JRCHC provides billing representatives and Facilitated Enrollment Specialists who will advocate for and work with them to find reasonable payment alternatives.

#### Policy

No patient will be denied service because of an inability to pay. All patients may apply to participate in the SFDP, and JRCHC will waive or reduce its fees for those who meet the eligibility requirements set forth in this policy and its accompanying appendices. JRCHC will base program eligibility on income and family household size only and will not discriminate on the basis of age, gender, race, sexual orientation, creed, religion, disability, national origin or ethnic origin, veteran status, or any other legally protected basis. The Federal Poverty Guidelines ("FPG's") will be used to create and annually update the sliding fee schedule to determine eligibility.

#### Applicability

This policy applies to all patients seeking any service from JRCHC, including, but not limited to medical, behavioral health, and physical therapy services.

#### Process

The following guidelines are to be followed in implementing the SFDP:

1. Notification: JRCHC will notify patients of the SFDP as follows:
  - The SFDP will be offered to each patient before or upon admission by way of verbal communication; patients seeking to apply for the SFDP will be offered a meeting with a billing representative and/or a Facilitated Enrollment Specialist or other Jericho Road employee at check-in.
  - The SFDP application will be available in paper form at the Front Desk to complete at home or the health center.
  - The SFDP application with explanations will also be available on JRCHC's website, [www.jrchc.org](http://www.jrchc.org).
  - JRCHC will place notices of the SFDP in health center waiting areas. Notifications will be effective and appropriate for the language and literacy level of the patient population.
2. Request for discount: Requests for discounted services may be made by the patient, household members, social services staff, or any other person who is aware of a patient's existing financial hardship. Applications should be returned to the office of the patient's provider.
3. Administration: The SFDP procedure will be administered through the Billing Manager or his/her designee. JRCHC will provide information about the SFDP and will assist in the completion of the application when needed. Dignity and confidentiality will be respected for all who seek and/or are provided services.
4. Alternative payment sources: If a patient has alternative payment sources such as third-party payments from insurance(s) and/or federal and state programs, those alternative payment sources must be exhausted prior to receiving a discount. Patients who have alternative payment sources but who are eligible for the SFDP may apply for the patient-responsibility (net charge after alternative payment sources payments) portion of their charges after their alternative payment source has paid. No patient with alternative payment sources will pay more than they would pay under the SFDP.
5. Completion of Application: The SFDP application must be completed in its entirety. By signing the SFDP application, the patient is authorizing JRCHC access to confirm income as disclosed on the application form. Providing false information on a SFDP application will result in all SFDP discounts being revoked and the full balance of the account(s) restored and payable immediately.

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If an application is unable to be processed due to the need for additional information, the applicant has two weeks from the date of notification to supply the necessary information without having the date on their application adjusted. If a patient does not provide the requested information within the two week time period, their application will be re-dated to the date on which they supply the requested information. Any outstanding account balances due as a result of the patient's delay in providing information will not be considered for the SFDP.

6. Expiration and Re-Application of Eligibility: Eligibility to participate in the SFDP expires after one year from the date of approval. The patient must re-apply to participate in the program using the sliding fee scale in existence at the time of re-application. Approval or denial of the re-application shall be determined in accordance with the terms of this policy and any procedures implemented in furtherance of the policy.
7. Eligibility: Discounts will be based on income and household size only.
  - **Income**: Defined as earnings received by anyone living in the household unit to support the household unit, and shall include, but is not limited to, (i) regular pay or wages; (ii) bonuses or other one-time payments from an employer; (iii) wages received for sick, vacation, and personal benefit time; (iv) unemployment compensation; (v) workers' compensation; (vi) social security; (vii) supplemental social security; (viii) public assistance; (ix) veterans' benefits; (x) survivor benefits; (xi) disability benefits; (xii) pension and retirement income; (xiii) educational assistance; and (xiv) alimony and child support. Income does not include noncash benefits such as food stamps or subsidized housing.ncome. Please see Appendix A for more information.
  - **Family Household Unit**: Defined as all persons related by birth, marriage, or adoption who reside together or are dependent upon the income of the applicant. The following compose the Family Household Unit: (a) the applicant and their spouse; (b) the applicant's unmarried partner if they are the parent of the applicant's child; (c) anyone under 21 years of age who lives with or is taken care of by the applicant; (d) anyone claimed as a dependent on the applicant's federal tax return; (e) anyone who claims the applicant on a federal tax return and their tax dependents.
8. Income verification: Patients are expected to provide appropriate information and documentation for the completion of their SFDP application, which includes information to determine sliding fee scale eligibility. Self-attestation is allowed for the first visit. Patients who self-attest for the first visit will be offered the opportunity to meet with a billing representative and/or a Facilitated Enrollment Specialist before or at their second visit. Patients who refuse or are unable to provide documented verification will be expected to provide a signed statement of income with a brief explanation of why he/she is unable to provide documented verification.
9. Discounts: Those with incomes at or below 100% of the FPG's will receive a full 100% discount. Those with incomes above 100% of the FPG's but at or below 200% of the FPG's, will be charged according to the attached sliding fee schedule. Those with a incomes above 200% of the FPG's are ineligible for the SFDP. The sliding fee schedule will be updated every calendar year with the latest federal poverty guidelines.
10. Nominal Fee: Patients receiving a full discount will be requested to pay a flat, nominal charge. However, patients will not be denied services due to an inability to pay. The nominal fee is not a threshold for receiving care and thus, is not a minimum fee or co-payment. The nominal fee will be set at a level that would be nominal from the perspective of the patient, as evidenced by input from patient board members, patient surveys, advisory committees, or a review of co-pay amounts associated with Medicare and Medicaid for patients with comparable incomes, and will not reflect the actual cost of the service being provided.
11. Waiving of Nominal Fee: In certain situations, patients may not be able to pay the nominal fee. The Director of Revenue Management or his/her designee will consider the patient's income and any extenuating circumstances and will determine whether to waive the nominal fee. Any waiving of charges should be documented in the patient's file along with an explanation (e.g., to pay, good will, health promotion event).

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12. Applicant notification: JRCHC will notify the patient of whether he/she qualifies for a discount and will note of the determination in the electronic medical record. If the application is approved for less than a 100% discount, the patient must pay the full amount of the service or make payment arrangements; patients may also schedule an appointment with a billing representative and/or a Facilitated Enrollment Specialist. SFDP applications cover outstanding patient balances for six months prior to the application date and any balances incurred within 12 months after the approved date, unless their financial situation changes significantly. The applicant has the option to reapply after the 12 months have expired or anytime there has been a significant change in household income. When the applicant reapplies, the look back period will be the lesser of six months or the expiration of their last SFDP application.
13. Payment at Time of Service: JRCHC will attempt to collect the patient's responsibility (e.g., co-pay, deductible) on the day of the visit. Adult patients seeking a physical, immunization, or a non-urgent service who are unable or refuse to pay anything at the time of the visit will have their appointment rescheduled and will be offered the opportunity to meet with a billing representative and/or a Facilitated Enrollment Specialist to discuss the SFDP, set up a payment plan, and/or seek alternative sources of payment. Minor children, women who are pregnant or believe they may be pregnant, and patients seeking a sick visit or urgent care (as determined by the provider and/or nurse) will receive services that day regardless of ability or willingness to pay at the time of visit. On or before the second visit, the patient or patient's representative will be offered the opportunity to meet with a billing representative and/or a Facilitated Enrollment Specialist to discuss the SFDP, set up a payment plan, and/or seek alternative sources of payment.
14. Refusal to Pay: JRCHC will not deny or refuse services to a patient due to an unpaid balance, expressed refusal to pay, or any other reason.
15. Record keeping: Information related to SFDP decisions will be maintained and preserved in the electronic medical record. JRCHC will preserve the dignity of those receiving free or discounted care.
16. In-Scope Services Provided via Contract: All in-scope services provided by another organization via a contract or other written agreement with JRCHC shall be provided in accordance with this policy, including the applicable sliding fee scale.
17. Policy and procedure review: Annually, the amount of SFDP provided will be reviewed by the CFO. The sliding fee scale will be updated based on the current FPG's and presented to the Board of Directors for approval.
18. Evaluation of the SFDP to reduce financial barrier: At least once every three years, JRCHC will evaluate its SFDP. At a minimum, JRCHC will collect utilization data that allows it to assess the rate at which patients within each of its discount pay classes, as well as those at or below 100% of the FPG, are accessing services. JRCHC will utilize this and, if applicable, other data (such as results of patient satisfaction surveys or focus groups, or surveys of patients at various income levels) to evaluate the effectiveness of the SFDP in reducing financial barriers to care. Based on this evaluation JRCHC will identify and implement changes as needed.
19. Budget: During the annual budget process, an estimated amount of SFDP service will be placed into the budget as a deduction from revenue. Board approval for the SFDP will be sought as an integral part of the annual budget.

This policy and procedure was reviewed and approved by the JRCHC Board of Directors.

DocuSigned by:  
 Board Chair Signature: *Claity Massey* Date: 3/24/2023  
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