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Sliding Fee Scale Discount Policy and Procedure

Policy: Northeast Colorado Family Medicine Associates maintains a standard procedure for qualifying patients for sliding fee scale discounts for services provided. Sliding fee scale discounts are available to patients with all incomes at or below 200% of the federal poverty guidelines. Sliding fee scale discounts apply to all directly provided Northeast Colorado Family Medicine Associates services, and for all in-scope services, provided by agreement by non-Northeast Colorado Family Medicine Associates providers.

Purpose: To reduce and/or eliminate financial barriers to care for medically underserved populations.

Procedure:

1. Northeast Colorado Family Medicine Associates Front Desk Staff inquire of all patients if they have healthcare coverage. For those with insurance or healthcare benefits, appropriate insurance information is documented in the practice management system at the time of registration. If the patient has Medicaid or Medicare, their eligibility will be verified prior to service.

2. The Front Desk Staff also informs patients in appropriate language that they have the option to apply for a sliding fee scale discount. Signage and the Northeast Colorado Family Medicine Associates website will also communicate the availability of a sliding fee scale discount. The sliding fee scale can also apply for co-payments, deductibles and coinsurance. In order to qualify, the patient must share family and gross income information. A family consists of those members of the household supported by the reported income, typically the individuals reported on the federal tax return. If s/he agrees to begin the qualification process, the Front Desk Staff asks the patient to complete the sliding fee scale application and provide any of the following documentation of gross income for all household members:

- -- Federal income tax return or
- -- Two current pay stubs or
- -- Unemployment benefit award letter or
- -- Letter from employer on letterhead or
- -- Award or benefit letter or
- -- Affiliated agency income verification documentation that meets above requirements

Patients that do not wish to apply for a sliding fee scale discount will be asked to attest to income and household size to be compliant with UDS reporting. Patients that refuse to be assessed will be billed full charges for their services.

Note: A patient is still eligible for sliding fee if their residency status is unknown or they are disqualified from government benefits.

3. The patient is eligible for a sliding fee discounts when all documentation is received and income criteria for discounts are met. Documentation is copied and filed and/or scanned in the patient's medical record

4. Using the attached sliding fee scale, determine the specific amount of discount for which the patient is eligible. The sliding fee scale will be reviewed and/or updated annually when the federal poverty guidelines are published in the federal register and the Promise Healthcare board of directors approves any changes.

5. Update the patient's account in the practice management system to reflect eligibility for sliding fee scale discounts, and the level of discount for which the patient has qualified.

6. The discount is applied to services provided by Northeast Colorado Family Medicine Associates, including dates of service prior to the determination.

7. Patients who qualify for certain levels of sliding fee discounts are also expected to apply for other programs if requested to do so:

a. Medicaid: All patients applying for sliding scale discounts are expected but not required to also apply for Medicaid if the patient appears to have a category for eligibility.

b. Other public and/or private health insurance and/or discount programs available for which the patient may qualify, including prescription drug assistance from pharmaceutical companies.

8. While a patient is awaiting their determination of eligibility from Medicaid, s/he will be offered sliding fee scale services based on their presumptive income, IF all other documentation is complete.

9. Patients will be asked for payment at the time of visit. Fees for patients who qualify for sliding fee scale discounts are indicated on the board-approved sliding fee scale discount schedule, which is reviewed, updated and approved annually. Nominal fees of \$5.00 for patients who are homeless or have no household income or income is at or below FPL may be waived with either a completed proof of income or Unable to Verify Income form. The Practice Manager and Practice Owners are authorized to waive fees when the fee would create a financial barrier to care. No patients are sent to collections for inability. Charges incurred will be wrote off by Northeast Colorado Family Medicine Associates, P.C.

10. Northeast Colorado Family Medicine Associates will maintain a uniform process for sliding fee discount program applications and patients must be re-qualified for sliding fee scale discounts annually by providing new/updated income/family documentation.

11. The Northeast Colorado Family Medicine Associates will review and approve the schedule of fees for services based on costs and market rates.