



Title: Indigent and Charity Patients	Original Date: 05/2014
Department: Business Office/Registration	Effective Date: 04/2016,04/2018
Approved by: LC & CD	References:

PURPOSE

To assist low income patients who reside in Jefferson County who don't qualify for any third party insurance but meet indigent criteria.

POLICY

Under the policies of Jefferson Hospital, when medically necessary, to admit patients regardless of race, creed, color, national origin, handicap or ability to pay.

The following guidelines are used to determine eligibility to private pay patients:

INDIGENT: Income level less than or equal to 200% of Federal Poverty Guidelines,

CHARITY: Income level greater than 125% of the Federal Poverty Guidelines up to 185% per sliding scale.

PATIENT RESPONSIBLE: Income above charity or indigent guidelines.

The patient folder remains in the admission office until patient is discharged. Indigent Charity application is reviewed and if meets criteria for any portion of bill adjustment, patient is contacted for documentation that is required to verify income stated on application. When that is provided, adjustments are made to patient account for the portion that qualifies for Indigent or Charity Care. Any remaining balance on the account is the responsibility of the patient. The adjustment is categorized based on qualifications met and appropriate adjustment is made to patient account.

INDIGENT- Indigent Adjustment

CHARITY- Charity Adjustment

PATIENT RESPONSIBLE- No adjustment or only partial adjustment.

If, for some reason, a patient is unable to furnish private pay information at the time of admission, a letter asking them if they are interested in applying for assistance or reduced rates, an application and a copy of their bill is mailed to them. Upon receipt of application, and meeting qualification as well as providing supporting documentation, then an adjustment is made to their account according to classification. All calculation adjustment forms are completed and filed in the account folder.

Jefferson Hospital retains the right to verify all income and employment information provided. Jefferson Hospital further reserves the right to prosecute any individual providing false or misleading income and/or employment information. It is at the Hospital's discretion to terminate patient's participation in the Indigent Program if Jefferson Hospital is not notified of any income, employment, or insurance changes that affect qualifications of the Indigent benefits. Furthermore the patient may be held responsible for all outstanding bills owed to Jefferson Hospital or Physicians Health Group if terminated for any of the above reasons.

****Jefferson Hospital employees who waive insurance coverage are not eligible for the Indigent Program****

To determine if the patient is to be declared a charity or indigent adjustment, the collection clerk researches for possible third- p a r t y coverage. If none can be found, account is adjusted in proper classification and posted to charity/indigent logs. These logs are kept in the collection office for each fiscal year.

If patient becomes eligible for Medicaid, the account is pulled and given to the proper insurance clerk to file. When eligibility for Medicaid is received the adjusted account is reversed and added back to accounts receivable.

If the patient is responsible, (the account is referred to Self-Pay vendor and they send a bill as well as call patients to try and collect payment). Subsequent bills and calls are generated by third party vendor until account is paid or is classified as bad debt.

It is the responsibility of Administration and Business Office employees to adhere to the policies and procedures regarding Indigent Care and to screen patients appropriately.

This policy will be reviewed and revised as necessary.

Reviewed/ Revised	<u>Reviewed</u>							
Date/ Initial	<u>1/17/18</u> <u>CSD</u>							