 <i>Russell Regional Hospital</i>	Title: Financial Assistance	
Department(s): Business Office	Reference #: 119 Version #: 5	
Origination Date: Not Set	Approval Date: 02/10/2020	
Approved By: Kalena Coleman (Director of Business Office), Kevin Kreutzer (CFO), Morris Krug (Board Chairperson), Sharon Collins (CEO)		

Purpose

To provide financial assistance to members of our community who seek emergent, urgent and medically necessary healthcare services from Russell Regional Hospital and Russell Regional Hospital Physicians Clinic that are indigent, medically indigent, uninsured, or underinsured in a fair, respectful, and consistent manner.

Responsibility

It is the responsibility of the Director of Business Office, Chief Financial Officer, Chief Executive Officer and the governing Board of Directors to approve this policy.

Definitions

1. **Emergent Services-** Services a patient needs to avoid immediate loss of life, limb, or eye. Generally, services are provided in the Emergency Room Department.
2. **Extraordinary Collection Activity (ECA) -** Refers to collection activities to collect monies on past due accounts. Activities that may occur if an account is past due include, but not limited to, referral of past due account(s) to outside collection agency, adverse reporting to credit bureau, legal judgements obtained against patient or guarantor, collection phone calls, and bench warrants for failure to comply with legal notices from outside collection agency.
3. **Federal Poverty Level (FPL)-** Poverty thresholds that are issued each year in the Federal Register by the Department of Health and Human Services (HHS).
<http://aspe.hhs.gov/poverty>
4. **Guarantor -**Refers to person who is financially responsible for a patient's account balance.
5. **Indigent -** Refers to patient that has no financial resources to pay obligation.
6. **Medically Indigent -** Refers to situation where payment of medical service obligation will create financial hardship.
7. **Medically Necessary Services -** Refers to services that are needed to in order to treat a patient that may suffer from a life-threatening condition, potential loss of limb or eye, and/or potential loss of bodily functions.



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Policy


A. Eligibility Determination

1. Emergency and Medically Necessary Services will be provided to every patient without discrimination, regardless of their inability to pay.
2. Eligibility for Financial Assistance will be consistent among all patients REGARDLESS of sex, race, creed, disability, sexual orientation, national origin, immigration status, or religious preference.
3. Eligible parties are patients or guarantors where the patient has received medically necessary or emergent care, and are indigent, medically indigent, uninsured, or underinsured.
 - a. The patient or guarantor’s total household income equals or falls below 200% of the Federal Poverty Level (FPL) for the current calendar year in order to qualify for financial assistance through Russell Regional Hospital and Russell Regional Hospital Physicians Clinic.
 - i. The Financial Assistance policy is updated annually in December.
 - ii. 2019 Federal Poverty Level Guideline (FPL)

Monthly Income Guidelines

	Level 1	Level 2	Level 3	Level 4	Level 5
Family Size	100% of FPL	125% of FPL	150% of FPL	175% of FPL	200% of FPL
1	\$1,041	\$1,301	\$1,561	\$1,821	\$2,602
2	\$1,409	\$1,761	\$2,114	\$2,466	\$2,818
3	\$1,778	\$2,222	\$2,666	\$3,111	\$3,555
4	\$2,146	\$2,682	\$3,219	\$3,755	\$4,292
5	\$2,514	\$3,143	\$3,470	\$4,400	\$5,028
6	\$2,883	\$3,603	\$4,324	\$5,044	\$5,765
7	\$3,251	\$4,064	\$4,876	\$5,689	\$6,502
8	\$3,619	\$4,524	\$5,429	\$6,334	\$7,238
9	\$3,988	\$4,984	\$5,981	\$6,978	\$7,975
10	\$4,356	\$5,445	\$6,534	\$7,623	\$8,712

- iii. Once it has been determined that a guarantor is eligible for financial assistance, please see section B. Patient/Guarantor Balance Responsibility Determination, a sliding fee scale will be used to determine the amount of the financial assistance discount. The patient/guarantor’s family size, along with household income, will be

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compared to the current year Federal Poverty Level Guideline chart, please see chart above.

1. Patient/guarantors' who meet Level 1, 100% of FPL, will receive a 95% discount.
 2. Patient/guarantors' who meet Level 2, 125% of FPL, will receive a 80% discount.
 3. Patient/guarantors' who meet Level 3, 150% of FPL, will receive a 60% discount.
 4. Patient/guarantors' who meet Level 4, 175% of FPL, will receive a 40% discount.
 5. Patient/guarantors' who meet Level 5, 200% of FPL, will receive a 25% discount
 6. Patient/guarantors that fall below Level 1, 70% of FPL, will receive a 100% discount.
4. Financial Assistance is secondary to all other financial resources available to the patient, including, but not limited to, employer-based insurance coverage, commercial insurance, liability insurance, and government programs.

B. Patient/Guarantor Balance Responsibility Determination.

1. Russell Regional Hospital and Russell Regional Hospital Physicians Clinic will not bill patients/guarantors, who are eligible for financial assistance, more than the amounts generally billed (AGB) for third party fee-for-service beneficiaries (individuals who have third party insurance or coverage for care).
 - a. To determine the AGB discount a Look-Back Method is used. Total Charges for all services, for a 12-month period (November 1st from the previous year to November 1st of the current year), that have received remittance advice from ALL primary third-party payers is compiled into a report. From there all corresponding allowances from the third parties for the total charges are compiled. The AGB is then calculated based on the average allowable % of all third-party payers.
 - i. The current calculated AGB is 63%. Patients and Guarantors applying for financial assistance, regardless if they have insurance coverage will be given up to a 37% AGB charity discount IF their balance is GREATER than 63% of total charges. The AGB discount is given prior to receiving the charity discount determined by the FPL.
 - ii. The AGB is recalculated annually in December.


C. Covered Services

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1. Emergent and Medically Necessary Services provided by Russell Regional Hospital and Russell Regional Hospital Physicians Clinic are covered under the Financial Assistance Policy.
2. Professional Services provided by employed and/or contracted Physicians, Nurse Practitioners, and Physician Assistants are covered under Russell Regional Hospital and Russell Regional Hospital Physicians Clinic Financial Assistance Policy. See the list below of current covered Providers under the Russell Regional Hospital and Russell Regional Hospital Physicians Clinic's Financial Assistance Policy. The providers are only covered when providing care at Russell Regional Hospital and Russell Regional Hospital Physicians Clinic.
 - a. James Anderson MD
 - b. Perry Desbien APRN
 - c. Morgan Galliard PA
 - d. Thomas Kriley MD
 - e. Norma Linde APRN
 - f. Kayanne Meitler APRN
 - g. Earl Merkel MD
 - h. Jeffrey Meyer MD
 - i. Sambhundh Panichabhongse MD
 - j. Teal Sander PA-C
 - k. Greg Seiler CRNA
 - l. Galen Slough APRN-C
 - m. Tyrel Somers MD
 - n. John Whitehead DO
 - o. Abbie Weigel APRN-C


D. Non-Covered Services

1. Russell Regional Hospital utilizes outside laboratory vendors to process certain lab work collected by Russell Regional Hospital. Quest Diagnostics is one of the laboratory vendors Russell Regional Hospital utilizes. Russell Regional Hospital's financial assistance policy does not cover any billing from Quest Diagnostics.
2. Russell Regional Hospital utilizes United Radiology of Salina to review and prepare a report of their findings on many of the radiologic exams performed at Russell Regional Hospital. Russell Regional Hospital's financial assistance policy does not cover any billing from United Radiology of Salina.
3. Central Kansas Orthopedics utilizes Russell Regional Hospital's facility throughout the month for outpatient clinics. Russell Regional Hospital does bill

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the patient or the patient's third-party payer for the costs of the facility. However, Central Kansas Orthopedics bills the patient or patients' third-party payer for the physician exam. Russell Regional Hospital's financial assistance policy does not cover any billing from Central Kansas Orthopedics. The patient will need to contact Central Kansas Orthopedics for information on Financial Assistance. Their contact information is: Central Kansas Orthopedic Group, 1514 K-96 Highway, Great Bend, KS 67530.

4. Russell Regional Hospital utilizes surgeons from Clara Barton Hospital for surgical procedures. Russell Regional Hospital does bill the patient or the patient's third-party payer for the costs of the Facility. However, Clara Barton Hospital bills the patient or the patient's third-party payer for the physician services. Russell Regional Hospital's financial assistance policy does not cover any bill from Clara Barton Hospital. Their contact information is: Clara Barton Hospital and Clinics, 250 W 9th St, Hoisington, KS 67544.
5. Russell Regional Hospital will not allow the use of Financial Assistance for Facilities and Providers who rent space in the Russell Regional Hospital Specialty Clinic.
 - a. Dr. Mark Bell and Dr. Gerald Cossette with Central Kansas ENT Associates 520 S. Santa Fe Ave, Ste 200A, Salina, KS 67401
 - b. Dr. Michael Matteucci with Salina Urology 501 S Santa Fe Ave, Ste 380, Salina, KS 67401
 - c. Dr. Britton Zuccarelli with Salina Pediatrics 201 S Santa Fe Ave, Ste 100, Salina, KS 67401
 - d. Dr. Gregory Boxberger with Wesley Physicians- Medical Specialties 2600 N Woodlawn St, Wichita, KS 67220
 - e. Leslie Mack, FNP-BC, BC-ADM, CDE with Salina Regional Health Center 2090 S Ohio St, Salina, KS 67401
6. Russell Regional Hospital will not allow the use of Financial Assistance for Elective Self Pay procedures and services. Russell Regional Hospital and Russell Regional Hospital Physicians Clinic considers the following Elective Self Pay procedures and services:
 - a. Health Fair
 - b. Dry Needling
 - c. Fitness
 - d. Meals on Wheels
 - e. Long Term Care (Main Street Manor)
 - f. Custodial Care
 - g. 3D-4D Prenatal Ultrasound
 - h. Abdominal Aortic Aneurysm Screening Ultrasound

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- i. Carotid Artery Screening Ultrasound
- j. Peripheral Cardiovascular Screening Ultrasound
- k. Complete Cardiovascular Screening Ultrasound
- l. CT Calcium Screening
- m. CT Lung Screening
- n. CT Virtual Colonoscopy Screening


E. Measures to publicize the financial assistance policy

The following measures are used to publicize the Financial Assistance Policy to both the community and patients:


1. Posting a plain-language summary of the Financial Assistance Policy on Russell Regional Hospital’s website at: <https://www.russellhospital.org/rrh-financial-assistance-policy-summary> . The Financial Assistance policy and Financial Assistance Application can also be found at the website above.
2. Posting Financial Assistance Availability Notices in the Emergency Department’s waiting room, Patient Registration Offices, Hospital Lobby, and Russell Regional Hospital Physicians Clinic Lobby.
3. Printing a plain language summary in patients’ monthly billing statements directing the patient/guarantor to the Financial Assistance Policy online at <https://www.russellhospital.org/rrh-financial-assistance-policy-summary>
4. Informing patients and guarantors, verbally, of the availability of Financial Assistance at time of registration for services, during the billing and customer service contacts. Patients will also be reminded of the availability of Financial Assistance at time of discharge from the hospital. Patients will be provided with a plain language summary of the Financial Assistance policy upon admission into the ER and upon registration at the hospital. Copies of the Financial Assistance policy and Financial Assistance application will also be available in the ER and in admissions.
5. Paper copies of the Financial Assistance policy, along with the Financial Assistance Application, are available upon request in the Business Office at Russell Regional Hospital free of charge.

F. Application Process


1. All qualifying applicants will be granted Financial Assistance for eligible services provided by Russell Regional Hospital or Russell Regional Hospital Physicians Clinic only.

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2. An application for financial assistance, free of charge, can be initiated by patient or guarantor by contacting Russell Regional Hospital and/or Russell Regional Hospital Physicians Clinic. This can be done in person, by calling the hospital at 785-483-3131 and requesting to speak to Business Office, by calling Russell Regional Hospital Physicians Clinic at 785-483-3333 and requesting to speak to billing, by visiting Russell Regional Hospital's webpage, <http://www.russellhospital.org/> or through the mail, Russell Regional Hospital, 200 S. Main St, Russell, KS 67665. Applications are also located at the Switchboard at Russell Regional Hospital. An application can also be emailed to a patient/guarantor upon request by contacting the financial counselor at 785-483-3131.
3. Applicants needing assistance in completing a Financial Assistance application can contact the Business Office and a financial counselor or other office staff member will be available to assist the applicant.
4. Financial Assistance will be applied to all of the patient's accounts, that have been deemed eligible for financial assistance, that are 240 days, or less, old from the date of first patient billing statement. Financial Assistance will also apply to the patient's future dates of services, up to 6 months from the time Financial Assistance was approved.
5. If the patient does not have insurance, but it appears they may qualify for Medicaid, they must apply for Medicaid coverage and receive a written denial of coverage from Medicaid. A copy of the denial from Medicaid will be required to complete the Financial Assistance Application process.
6. The patient or guarantor is ultimately responsible to supply all required documents to determine if patient or guarantor is eligible for Financial Assistance.
 - a. Documents are required to verify patient or guarantor's financial data. Patient or guarantor must submit documentation in order to determine eligibility. Failure to comply with required documentation will not have Financial Assistance Applications processed.
 - i. Two Most Recent Copies of Paycheck. If patient or guarantor receives Social Security, copies of two of the most recent payments are required. Prior Year Tax Return if copies of paychecks cannot be provided.
 - ii. Two Most Recent copies of payments from unemployment, Worker's Compensation, retirement plan, or liability insurance if applicable.
 - iii. Two Most Recent copies of bank statements for both checking and savings accounts.


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- iv. Listing of all monies received from charities, family members, or friends to assist with living expenses.
 - v. Completed Financial Assistance Application.
 - vi. Medicaid coverage denial letter if applicable.
7. Once all required documents are completed and turned into the Business Office the Financial Assistance Application Period will begin.
- a. The financial counselor in the business office will create a financial assistance packet which will include all required financial verification documents, completed Financial Assistance Application, and completed Financial Assistance Eligibility Determination worksheet. **The patients' assets, bank accounts, real estate, automobiles, other assets/investments are not considered in the determination worksheet.**
 - b. All accounts being considered for Financial Assistance will be placed on a 'hold' status while the Financial Assistance Packet is being reviewed. The 'hold' status begins when all completed documentation and completed Financial Assistance application is turned in to the Business Office. Patients and/or guarantors are responsible for their account balance and appropriate payment arrangements need to be established while the patient and/or guarantor complete their application and obtain all required written documentation.
 - i. It should take no more than 30 days for the Financial Assistance Application process to be completed by Business Office. If the patient or guarantor fails to cooperate and provide all requested documents, the account(s) may be turned to outside collection agency and collection activity may begin.
 - 1. Collection activity may begin 121 days post the first billing to patient.
 - ii. The 'hold' status will prevent account(s) from proceeding through the collection process, including assignment to outside collection agency.
 - iii. Written Notice of Approval or Denial of Financial Assistance will be sent to the patient or guarantor.
 - c. Once the Financial Assistance Packet is compiled by the financial counselor, the Financial Assistance Packet will be presented to the Business Office Manager, CFO, and CEO for review for approval or denial.
 - d. Russell Regional Hospital and Russell Regional Hospital Physicians Clinic will make every reasonable effort to inform each patient/guarantor of the financial assistance policy prior to placing an account with an outside collection agency. Ultimately, the final authority over whether an account

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will be placed with a collection agency will be the responsibility of both the Business Office Manager and Chief Operations Officer.

- e. Should a patient's account be transferred to an outside collection agency (accounts will not be turned to bad debt/outside collection agency till 121 days past the first billing to patient or guarantor) and subsequently a completed Financial Assistance Application, along with all required financial verification documents, is submitted to Business Office, Russell Regional Hospital and Russell Regional Hospital Physicians Clinic will:
 - i. Contact Outside Collection Agency and have all extraordinary collection activities (ECA) discontinued till Financial Assistance Application is approved or denied. If the Financial Assistance application is denied, extraordinary collection activities will resume.
 - ii. Review Financial Assistance Packet and document determination regarding eligibility.
 - iii. Notify the person financially responsible, guarantor, for the account(s) in writing of the eligibility determination. If the patient or guarantor is approved for Financial Assistance, the amount of Financial Assistance will be listed.
- f. If Russell Regional Hospital and/or Russell Regional Hospital Physicians Clinic determines that the patient or guarantor qualifies for a Financial Assistance discount the following actions will happen:
 - i. The patient or guarantor will be provided with a billing statement that indicates the amount the patient or guarantor owes after AGB discount, if applicable, and/or Financial Assistance discount is applied to balance.
 - ii. If patient or guarantor has made payments for account(s) being approved for Financial Assistance and it is determined that the patient or guarantor paid for care in excess of the amount he or she was determined to owe as a Financial Assistance eligible individual, refunds of the excess payments will be made to patient or guarantor.
 - iii. Takes all reasonably available measures to reverse any ECA taken against the patient or guarantor to collect the debt as issue; such measures shall include but not be limited to: vacating any judgements and remove from the individual's credit report any adverse information that was reported to a reporting agency or credit bureau.
 - iv. Will work with the patient or guarantor to resolve remaining account balance(s). Patients or guarantors are responsible to make mutually acceptable payment plan arrangements with the Business Office within


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30 days of receiving a written notice of determination regarding their Financial Assistance application.

1. If the patient or guarantor fails to make timely payments AND does not communicate with Business Office staff the reason for late or no payments, the account(s) can be turned to an outside collection agency and collection activity will begin 121 days past the first billing to patient or guarantor.
- g. Allowances may be made for those patients or guarantors that are experiencing extenuating circumstances based on each person's unique life circumstances and mitigating factors. The amount of assistance, provided Russell Regional Hospital and/or Russell Regional Hospital Physicians Clinic, will always be more than outlined in the guidelines, but never less.
 - i. Russell Regional Hospital Administration will be responsible for approving or denying financial assistance discounts due to extenuating circumstances a patient or guarantor may be facing. Additional information from the patient or guarantor may be requested to make determination (example: copies of other medical bills).
 - ii. Russell Regional Hospital Administration reserves the right to determine Financial Assistance eligibility based on other factors in cases where the patient/guardian is unable to provide written documentation. The factors that may be considered are:
 1. Previous completed, and approved, Financial Assistance Application for patient/guarantor that is less than 2 years old.
 2. May complete application for patient/guarantor based on information patient/guarantor provided verbally to the Business Office.
 3. Receives record of patient/guarantor's death and that there is not an actively open estate.

G. Financial Assistance Determination

1. Financial Assistance discounts are determined based on a sliding-fee scale and are subject to patient or guarantor's household income. To obtain Financial Assistance, the patient or guarantor must establish that the household income is below 200% of the most recent Federal Poverty Level (FPL) at the time a financial assistance application is submitted to the Business Office.
2. 'Household Income' includes all pre-tax income, however derived, for all persons 18 years old and over who reside in the household.

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3. 'Disposable Income' will be set at 85% of the patient or guarantor's income.
4. Incomplete Financial Assistance applications, missing financial verification documents, and/or undocumented information within the application, may cause Russell Regional Hospital and Russell Regional Hospital Physicians Clinic to deny the assistance until the completed application and/or required documentation is provided. Russell Regional Hospital and Russell Regional Hospital Physicians Clinic will retain the incomplete application and send written correspondence outlining the information needed, and instructions of submitting the information.
5. Patients and guarantors can appeal a denial of Financial Assistance by providing additional information regarding eligibility determination and/or a written explanation of extenuating circumstances, to the Chief Financial Officer (CFO) of Russell Regional Hospital within 30 days of receiving the written denial notification. Additional information and/or written explanation of extenuating circumstances need to be sent to Russell Regional Hospital, Attn: CFO, 200 S Main St., Russell, KS 67665. The party making the appeal will be notified in writing of the final decision made by the CFO.

H. Applying Financial Assistance and AGB Adjustments


1. All Financial Assistance and AGB adjustments will be reported to the appropriate general ledger (GL) accounts and appropriate patient accounts.

I. Maintaining Financial Assistance Applications and Supporting Documents

1. Patients and guarantors will need to submit a NEW, completed Financial Assistance Application, along with required documents; every 6 months to have their Financial Assistance eligibility reviewed and renewed, if patient and/or guarantor meet all eligibility requirements.
2. All Financial Assistance applications, along with all supporting documentation, will be maintained for a period of seven years.

Related Documents

1. Forms –
2. Policies –
3. Source(s) –
 1. <http://aspe.hhs.gov/poverty>
 2. <https://www.russellhospital.org/rrh-financial-assistance-policy>
 3. <https://www.russellhospital.org/rrh-financial-assistance-policy-summary>

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