

Native American Rehabilitation Association of the Northwest, Inc.
POLICIES AND PROCEDURES

TITLE: 904 SLIDING FEE SCALE POLICY
MANUAL: GENERAL ADMINISTRATIVE/FISCAL
EFFECTIVE: October 2004
REVISED: 2013; 2014; 2015; 2016

904.1 POLICY:

No patient will be declined services because of an inability to pay for services.

In an effort to assist those patients unable to pay for services, NARA will provide a discount for services to patients determined eligible for the Sliding Fee Scale discount. Sliding Fee Scale discounts will be based on the most recent Federal poverty guidelines.

Fees for medical services will not be charged to clients who meet the Indian Health Service eligibility requirements for American Indian/Alaska Native designation, and also those meeting the homeless designation as defined by the Bureau of Primary Health Care in this policy.

904.2 PROCEDURE:

904.21 Income Reporting

Each patient is asked to report his/her income in order to determine their ability to pay for services. NARA defines income as any money that is received by the patient, from any source. This would include unemployment, child support, wages, and any other monetary assistance. This would exclude food stamps, WIC, and other non-monetary assistance.

The preferred source documents for verification of income are the latest filed tax return or the previous three months pay stubs. If self-employed, the patient should report the previous three months income statements. If the patient is unemployed, on worker's comp, disability, or retired, the documentation should include the previous three months income receipts/pay stubs from the appropriate payers and/or letters of income verification from two other individuals.

904.22 Sliding Discount Scale:

The government produces a sliding discount scale annually in January, called the Federal Poverty Guidelines. This will be used to determine the amount each client will be asked to pay. The table within this policy establishes the discounts based on the gross income and number of family members.

NARA defines family as all family members/individuals living in your household, (or outside your household) for which you are financially responsible. The applicant will need to bring in proof of income for all those age 18 or older that live in their household (or outside their household) for which they are financially responsible.

When a uninsured patient first registers with NARA they will be designated as a self-pay patient until the time at which they bring in proof of IHS eligibility or fill out the sliding fee scale application and bring in all required proof of income. Once the required documentation for the application is submitted it will be reviewed by the patient registration staff for determination of approval and discount category. Determination will be made within 30 days.

These discounts will be applied to the total charges for your visit, including labs or plain x-rays ordered by the provider, supplies/equipment, and any procedures performed during the visit. Medication from the pharmacy falls outside of the visit charges.

Patients whose income falls below 100% of the FPL will not be assessed any charge. Those between 101%-200% of the poverty level will be asked to pay a flat fee of \$30.00, \$40.00 or \$50.00 depending on which category of the discount levels they fall under. Patients with income 201% or higher will be expected to pay the full cost for their care.

NARA has a written agreement with a laboratory, radiologist and gynecologist for which we can refer our patients to outside of NARA to receive services through. Within these agreements is a provision requiring that they offer a sliding discount scale that is equal to or greater than the one we offer to our patients. The charges remaining as a patient balance after the discount will be the patient's responsibility.

The sliding fee discount scale will be applied to both insured patients and uninsured patients in the same manner. An insured patient may wish to receive a service that is not covered by their insurance, acupuncture for example, and for that service they would then be charged based on our sliding fee scale. The out-of-pocket costs for income eligible insured patient will not exceed the amount indicated by the sliding fee scale unless barred by contract.

The flat fee assessed will be asked for once per day, per department. NARA has three separate departments (medical, dental and behavioral health). These fees will be asked for when the patient checks in for their appointment. There are some exceptions to these daily department fees that may apply such as RN-only visits, lab only visits, and some group visit types. The patient will be provided with a statement indicating their remaining balance and be asked if they can make a payment on that balance at their next appointment.

NARA will work with the patient to set up a payment plan for collection of any fees. A hardship waiver application is also available for patients that have experienced some hardship that creates a difficulty with their ability to pay the assessed fee. The application will be reviewed by the billing manager and the billing manager will notify the patient regarding approval status.

NARA will not send a patients debt to a collection agency for recovery. NARA will write off these debts periodically according to our billing policies.

At least once during the project period NARA will obtain feedback from the patients to see if they feel that the fees assessed for services seem appropriate. This feedback will be passed on to the Board. When this feedback is passed to the Board they will examine the fees with respect to potential barriers to care and document the outcome in their monthly meeting minutes.

The Board members shall review this policy annually, following the FPL update in January, or when any other changes are made during the year to it. They will document approval of it in their meeting minutes.

DEFINITIONS:

Indian Health Services Designation:

Per the Indian Health Care Improvement Act, P.L. 94-437, “Indians” or “Indian”, unless otherwise designated, means any person who is a member of an Indian tribe, (1) irrespective of whether he or she lives on or near a reservation, is a member of a tribe, band, or other organized group of Indians, including those tribes recognized now or in the future by the State in which they reside, or who is a descendant, in the first or second degree, of any such member, or (2) is an Eskimo or Aleut or other Alaska Native, or (3) is considered by the Secretary of the Interior to be an Indian for any purpose, or (4) is determined to be an Indian under regulations promulgated by the Secretary.

Definition of Homelessness:

As defined by BPHC in section 330(h)(4)(A), a homeless individual is “an individual who lacks housing (without regard to whether the individual is a member of a family), including an individual whose primary residence during the night is a supervised public or private facility (e.g. shelters) that provides temporary living accommodations, and an individual who is a resident of transitional housing.” A homeless person is an individual without permanent housing who may live on the streets; stay in a shelter, mission, single room occupancy facilities, abandoned building or vehicle; or in any other unstable or non-permanent situation. An individual may be considered to be homeless if that person is “doubled up”, a term that refers to a situation where individuals are unable to maintain their housing situation and are forced to stay with a series of friends and/or extended family members. In addition, previously homeless individuals who are to be released from a prison or a hospital may be considered homeless if they do not have a stable housing situation to which they can return. Recognition of the instability of an individual’s living arrangements is critical to the definition of homelessness.

Based on this definition, it is NARA’s policy to recognize that those living in the following circumstances are to be considered homeless:

- Were unable to pay rent in the last month
- Living wherever they are not paying rent or where their name is not on the lease
- Living with a friend or relative and not paying rent
- Living in a shelter
- Living at a recovery center
- Living in transitional housing
- Living in the streets

- Living in a car/bus, or other type of vehicle
- Living in an encampment
- Living in a park or under a freeway
- Traveling with no fixed income
- Have lived in any of the above situations, excluding the first, in the last year.

Definition of Family:

NARA defines family as all family members/individuals living in your household, (or outside your household) for which you are financially responsible. The applicant will need to bring in proof of income for all those age 18 or older that live in their household (or outside their household) for which they are financially responsible.

Examples listed below of situations that fit into the Family definition::

- Spouse/Partner and children living in your home that you are financially responsible for
- Aunt or Grandmother or nephew for example, if they are living in your home and you are financially responsible for them
- An adult child over 18 years of age that is in college and not living with you but that you are helping to support and are financially responsible for
- A child of yours that you are financially responsible for that lives with someone else

Examples listed below of situations that do not fit into the Family definition:

- An adult child over 18 years of age that is not in college and not living with you
- A friend/relative staying in your home but for whom you are not financially responsible
- Someone crashing on your couch for awhile in your home but you are not financially responsible for

Accepted Income Verification Sources:

- Federal Tax forms, W-2s, 1099s
- Last 3 consecutive months of the following:
- Social security, pension, unemployment, annuity and veteran's benefits
 - Alimony, child support, military family allotments
 - Income statements from business or self employment
 - Income from dependents
 - Foods stamps & WIC

**NARA HEALTH SERVICES
2016 SLIDING DISCOUNT SCALE**

Family Size	Income Measure	Category 0	Category 1	Category 2	Category 3	Category 4
% of Federal Poverty Income Guidelines		up to 100%	100.01% - 132.99%	133.00% - 149.99%	150.00% to 199.99%	200.01% +
		\$0	\$30	\$40	\$50	100% Self Pay
1	Annual	\$0 - \$11,880	\$11,881 - \$15,800	\$15,801 - \$17,820	\$17,821 - \$23,760	\$23,761 +
	Monthly	\$0 - \$990	\$991 - \$1,317	\$1,318 - \$1,485	\$1,486 - \$1,980	\$1,981 +
2	Annual	\$0 - \$16,020	\$16,021 - \$21,307	\$21,308 - \$24,030	\$24,031 - \$32,040	32041+
	Monthly	\$0 - \$1,335	\$1,336 - \$1,776	\$1,777 - \$2,003	\$2,004 - \$2,670	\$2,671 +
3	Annual	\$0 - \$20,160	\$20,161 - \$26,813	\$26,814 - \$30,240	\$30,241 - \$40,320	\$40,321 +
	Monthly	\$0 - \$1,680	\$1,681 - \$2,234	\$2,235 - \$2,520	\$2,521 - \$3,360	\$3,361 +
4	Annual	\$0 - \$24,300	\$24,301 - \$32,319	\$32,320 - \$36,450	\$36,451 - \$48,600	\$48,601 +
	Monthly	\$0 - \$2,025	\$2,026 - \$2,693	\$2,694 - \$3,038	\$3,039 - \$4,050	\$4,051 +
5	Annual	\$0 - \$28,440	\$28,441 - \$37,825	\$37,826 - \$42,660	\$42,661 - \$56,880	56881 +
	Monthly	\$0 - \$2,370	\$2,371 - \$3,152	\$3,153 - \$3,555	\$3,556 - \$4,740	\$4,741 +
6	Annual	\$0 - \$32,580	\$32,581 - \$43,331	\$43,332 - \$48,870	\$48,871 - \$65,160	\$65,161 +
	Monthly	\$0 - \$2,715	\$2,716 - \$3,612	\$3,613 - \$4,073	\$4,074 - \$5,430	\$5,431 +
7	Annual	\$0 - \$36,730	\$36,731 - \$48,851	\$48,852 - \$55,095	\$55,096 - \$73,460	\$73,461 +
	Monthly	\$0 - \$3,060	\$3,061 - \$4,071	\$4,072 - \$4,591	\$4,592 - \$6,122	\$6,123 +
8	Annual	\$0 - \$40,890	\$40,891 - \$53,011	\$53,012 - \$59,255	\$59,256 - \$77,620	77621 +
	Monthly	\$0 - \$3,407	\$3,408 - \$4,418	\$4,419 - \$4,938	\$4,939 - \$6,468	\$6,469 +
for each additional person, add		\$4,160 A / \$347 M	\$4,160 A / \$347 M	\$5,532 A / \$461 M	\$6,240 A / \$520 M	\$8,320 A / \$693 M

**Based on 2016 Federal Register Poverty Income Guidelines*

Exclusions:

- Lab only visits
- RN only visits
- Some groups - such as Culture group
- Some in-office procedures
- NO offsite services are eligible such as hospital services

The following table is our most common visit codes and their charges:

CODE	DESCRIPTION	CHARGE
MEDICAL:		
99211	OV Est. Brief - Nurse	\$ 68.00
99212	OV Est. Limited	\$ 146.00
99213	OV Est. Expanded	\$ 210.00
99214	OV Est. Detailed	\$ 248.00
99215	OV Est. Comprehensive	\$ 331.00
99201	OV New Brief	\$ 146.00
99202	OV New Limited	\$ 241.00
99203	OV New Expanded	\$ 249.00
99204	OV New Detailed	\$ 390.00
99205	OV New Comprehensive	\$ 499.00
BEHAVIORAL HEALTH:		
H0004	Individual Therapy (15 mins)	\$ 62.00
90853	Group Psychotherapy	\$ 89.00
90791	Psychiatric Evaluation	\$ 355.00
90832	Individual Psychotherapy	\$ 199.00
90847	Family Psychotherapy	\$ 268.00
ALCOHOL & DRUG TREATMENT		
H0004	Individual Therapy (15 mins)	\$ 62.00
H0005	Group Therapy	\$ 89.00
H0001	Assessment	\$ 228.00
H0003	UA	\$ 32.00