

## **CHARITY CARE**

If you do not have health insurance or you are unable to pay for your services, here at Eagleville, you may qualify for Medical Assistance, Medicare or our Charity Care Program. Charity Care may cover your inpatient treatment course and related charges partially or in full. Applicant(s) for Charity Care must agree to complete the application and assist our Financial Counselors by furnishing information required to complete the Charity Care Application.

If you have Medicare or health insurance, the Charity Care program will not pay for any amounts that are covered by those insurers. Applicant(s) will be expected to exhaust all other payment sources as a condition for approval. For example, you might be eligible for Medicare or Medicaid. Therefore, you will be required to apply for those programs before seeking Charity Care.

See Below to view the full policy;

## EAGLEVILLE HOSPITAL

Supersedes All Previous Policy  
Dated: April 30, 2003; Revisions 1/25/2008; 9/15/08

No. 8100.220  
Page 1 of 3

SUBJECT: Charity Care

Department Responsible: Finance  
Related Department(s): Patient Accounts, Admissions, Compliance

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### **PURPOSE:**

To promulgate the policy and procedures for the administration of Charity Care by Eagleville Hospital.

### **POLICY:**

Eagleville Hospital is committed to treating all individuals requiring medically necessary services within the Hospital's scope of care regardless of ability to pay, and that each will receive the same care, dignity and consideration extended to all of our patients. Eagleville Hospital will assist patients in obtaining health insurance coverage or any other funding available from privately and publicly funded sources whenever appropriate. Eagleville Hospital considers each patient's ability to pay for his or her care and extends Charity Care or Partial Charity Care to eligible patients unable to pay for their care in accordance with this policy. This policy reinforces the eligibility procedures for Charity Care and Partial Charity Care that comply with applicable federal, state, and local law.

Patients who do not have health insurance coverage may qualify for Charity Care based on their income and their family size. Patients who have health insurance may also be eligible for Charity Care for the portion of their bill that is not covered by health insurance, including deductibles, coinsurance, exhausted benefit, denied benefit and/or lack of authorization for services. Patients who do not have health insurance coverage, while referred from or referred to the county office for funding, are deemed to qualify for Charity Care eligibility. Patients who have died and have no estate are deemed to have no income for the purpose of determining Charity Care eligibility.

### **DEFINITIONS:**

"Charity Care" is defined as providing 100% free medically necessary services for patients who are uninsured or underinsured, low income individuals or have family incomes not in excess of 200% of the current Federal Poverty Guidelines. (See Attachment 1.) Such services are provided by this facility without expectation of full payment pursuant to current Federal Poverty Guidelines.

"Partial Charity Care" Patients who are ineligible for governmental or other insurance coverage with family incomes in excess of 200% but not exceeding 500% of the Federal Poverty Guidelines will be eligible to receive Partial Charity Care in the form of a discount off charges.

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### SCOPE:

Charity Care/Partial Charity Care does not include bad debt or contractual shortfalls from Medicare and Medicaid programs, but may include insurance co-payments or deductibles, or both.

Patients who are covered by Medicare, Medicaid and/or other health insurance are not eligible to receive Charity Care for any amounts that are covered by insurers. Applicants are expected to exhaust all other payment sources as a condition of approval for Charity Care/Partial Charity Care. Patients who might be eligible for Medicare or Medicaid will be required to apply for those programs before seeking Charity Care/Partial Charity Care.

### RESPONSIBILITY:

- Financial Counselors — Assist the patient in applying for public funding if patient is identified as uninsured and in facilitating the Charity Care application process. Monitor the progress and review all data in conjunction with the Patient Accounts Representative in addition to procedures listed in policy #8100.210
- Patient Accounts Representative — Will Review Charity Care information in conjunction with Financial Counselors, and execute the procedures listed in policy #8100.208
- Business Office Manager — Will review Charity Care applications with Director of Patient

Accounts and Director of Finance for final determination and send notification to patient. Manager will also interpret the definitions and execute the procedure listed below.

### PROCEDURE:

1. Seek collection of payment or establish payment arrangements with the patient guarantor in accordance with the current Federal Poverty Guidelines.
2. Patients extended Partial Charity Care in the form of a discount must sign a written agreement to pay the amount of the hospital bill remaining after deducting the discount. The patient will receive a bill showing full charges, the amount of discount and the amount due.
3. Upon review of current, past, and future earning potential, financial disclosure information

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will be secured from the cooperative patient/guarantor or his/her assignee, who continues to show interest in assisting with all attempts to obtain health coverage, including those made on his/her behalf through Medicaid and/or single county offices and/or Charity Care application. See below for Eligibility Determination.

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4. The Hospital is dedicated to following current Federal Poverty Guidelines relating to confidentiality, and may be limited in its ability to obtain information from the responsible party, if other than the patient, which may include employment status and earning capacity. We will look to the cooperation of the patient in this endeavor and a financial counselor will work closely with the cooperating patient to exhaust all potential opportunities to secure pertinent information with regard to a patient's current financial circumstances.

5. Patients who are referred by the single county offices are considered indigent and have no health insurance. Any services provided to patients for whom the hospital does not receive payment from the county will be considered as Charity Care.

**ELIGIBILITY DETERMINATION:**

When a patient is identified as uninsured, or requests a Charity Care application, Eagleville Hospital personnel shall provide the patient with the Charity Care application. Some or all of the following documentation will be required at the time of the application:

1. Medical Assistance eligibility/denial notice (if applicable)
2. Most recent pay stubs
3. W-2 forms
4. Unemployment statement
5. Disability statement
6. Checking account statements for past month
7. Savings account statements for past month
8. Other outstanding medical bills

Attachment 1:  
Charity Care and Partial Charity Care Table

APPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_

APPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_



## Charity Care and Partial Charity Care Table\*

To apply for Charity Care or Partial Charity Care, the patient must complete a Charity Care application including proof of income and assets.

Size of Family Unit	2xFPG**	3xFPG	4xFPG	5xFPG
	100% Charity Care	50% Discount	20% Discount	10% Discount
1	\$22,340	\$33,510	\$44,680	\$55,850
2	\$30,260	\$45,390	\$60,520	\$75,650
3	\$38,180	\$57,270	\$76,360	\$95,450
4	\$46,100	\$69,150	\$92,200	\$115,250
5	\$54,020	\$81,030	\$108,040	\$135,050
6	\$61,940	\$92,910	\$123,880	\$154,850
7	\$69,860	\$104,790	\$139,720	\$174,650
8	\$77,780	\$116,670	\$155,560	\$194,450

For families with more than 8 persons, add \$3,960 for each additional person.

\*This Table shall be adjusted in accordance with annually released changes to the Federal Poverty Levels. The extent of Charity Care and Partial Charity Care is also contingent on the level of assets available to pay for care without becoming medically indigent, as further set forth in Charity Care policy.

\*\* FPG = FEDERAL POVERTY GUIDELINES

SOURCE: [Federal Register](#), Vol. 77, No. 17, Thursday, January 26, 2012, pp. 40345-4035

Rev. 2/12 ams