



Policy
People Incorporated (PI)

Revenue Cycle Policy:

Sliding Fee Scale Discount Program

Effective: 1/1/2013

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Responsible People Incorporated Officers

Finance Director
Revenue Cycle Manager
Compliance Officer

Responsible Office

PI Administration

Policy Statement

People Incorporated (PI) is committed to providing health services to individuals regardless of their ability to pay. For these services, PI will use a “Sliding Fee Scale Discount” (SFS) program.

The following principles govern implementation of the SFS policy:

- The SFS discount program will be informed by the Federal Poverty Guidelines.
- Families or individuals who are uninsured or underinsured (have insurance but do not have mental health coverage) and not eligible for Medicare or Medicaid can apply for the SFS program. Eligibility to receive a discount is determined by household income and number of household members.

- PI prepares an annual fee schedule for the provision of health services that is consistent with locally prevailing rates and is designed to cover reasonable costs of operation.
- Non-medically necessary health services as determined by the Divisional Directors are excluded from the SFS program.
- The SFS is not applicable to co-payments.
- The SFS is not applicable to deductibles.
- The SFS is not applicable to “spendowns”.
- The SFS will replace all existing discounting programs.
- This Policy applies to all PI sites and programs.
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Policy

People Incorporated is committed to providing necessary behavioral health services for low income individuals and families in need in accordance with our policies and procedures.

Who Should Know This Policy

- All Directors (Administrative, Clinical and Finance)
- Compliance Staff
- Performance Management Staff
- Human Resources Staff
- Mental Health Providers
- Billing Staff
- Finance Staff
- Accounting Staff
- Clinical Lead Staff
- Supervisor/Manager Staff
- Development Staff
- Volunteers
- Patient Services Staff
- Program and Patient Flow Staff
- All Staff

Definitions

Adjustment

- Difference between the amount a provider charges for a service or procedure and the amount that a payer recognizes as an approved amount. Patient self-pay charges subject to the SFS could be adjusted up to 100%.

Co-insurance payment

- The percentage of the charge for a medical service that is the patient's responsibility when an insurer pays less than 100% of the charge.

Co-payment

- Patients' insurance carrier will set dollar amount a patient pays when receiving specific medical services, treatments, or supplies.

Pre-Payment

- PI may set dollar amount a patient pays when receiving specific services, treatments, or supplies not covered by insurance and/or uninsured patients.

Eligibility documents

- A documentation and/or letter of denial for Medicaid from Minnesota Department of Human Services(DHS)
- Income verification
 - Current check stub
 - Copy of income tax
 - Retirement benefits
 - Workers Compensation
 - Bank statement
 - Disability pay
 - Social Security benefits
 - Unemployment benefits
 - Social Security Income & Social Security Disability (SSI)
 - Self-employed income tax return
 - Self-declaration if self-employed
 - Letter from employer if paid in cash
- Proof of address
 - Rent receipt
 - Utility bill (gas, electric, telephone)
 - Voter registration card
- Picture identification
 - Driver's License/State ID
 - Mexican Matricula Consular ID Cd.
 - Alien Regist. Cd.
 - *for Juvenile: School ID.*
 - Self-identification

Eligible Persons

- Individuals with annual household income below 200% of the Federal Poverty Guideline who are uninsured or underinsured and not eligible for Medicaid or Medicare or any other government health care program

Household Income

- Total Annual income for all members of the household

Changes in household income may include but not limit to:

- Obtaining employment or becoming self employed
- Loss of employment or loss or owned business
- Increase or decrease in wages
- Becoming eligible or ineligible for:
 - Unemployment
 - Workers' Compensation
 - Disability
 - Social Security Income benefits
 - Social Security Disability
 - Retirement benefits
 - Bankruptcy filings
- Becoming a landlord, building manager or building caretaker
- Absent any of the above, written self-declaration is acceptable

Household Member

- All individuals permanently residing in the household
 - Changes in number of household members include:
 - Marriage
 - Divorce or separation
 - Birth
 - Death
 - Adoption
 - Other household members added or removed

Non-covered services

- Services which do not qualify for reimbursement under government programs or other insurance programs

Other changes affecting SFS eligibility

- Medical Assistance – become eligible or terminated
 - Medical Assistance or other public insurance programs
 - Change in plan assigned through PMAP

Uninsured

- A person who does not qualify for health benefit through Medicaid, Medicare or other commercial or public insurance programs.

Underinsured

- Services provided are not covered by insurance.

Revision History

This policy shall be reviewed periodically and updated consistent with the requirements established by the Divisional Directors, PI Management, The Finance Committee, Federal and State law regulations and applicable accrediting and review organizations. All revisions must obtain PI Board approval prior to implementation.

Effective: 1/01/2013

Amended:

Definitions

Bad Debt is the cost for providing care to persons who are able but unwilling to pay some portion of the medical bill for which they are responsible.