

Policy: FM-008	Date(s) Revised:	05/2017
Subject: <i>Indigent and Charity</i>		
Applicable Service(s): Home Health	Page:	Page 1 of 3

PURPOSE:

- To provide a mechanism for obtaining fair reimbursement for services rendered to all patients. To provide guidelines to be considered when establishing patient eligibility for uncompensated or discounted services for uninsured or underinsured indigent and charity patients.
- To establish a framework in which uncompensated or discounted services can be given consideration and mechanisms for approval of such services.

PROCEDURE:

1. Requirements for Consideration of Indigent or Charity Services
 - a. The indigent patient must meet the indigent income levels of 125% of the Federal Poverty Guidelines (for appropriate family size) as defined below for the year 2014, or subsequent years as those guidelines are updated by the Federal government.
 - b. The charitable patient must have an income level greater than 125% of the Federal Poverty Guidelines, for his or her family size, but less than 400% of the Federal Poverty Guidelines.
 - c. An indigent or charitable patient has no other source of governmental, insurance or other third-party reimbursement for all or the portion of his or her bill that is written-off or discounted pursuant to this policy. An income qualified indigent or charity patient may be so qualified, however, for services rendered in excess of (or excluded from) that patient's defined benefits under any governmental or insurance coverage.
 - d. The patient and/or staff member working with the patient should document his or her income by the best available information in his/her possession, such as W-2 form, pay stub, tax return, Medicaid card, or other similar documentation of income level. Persons seeking a discount under this policy should fill out a form that attests to his or her income and family size and the social worker or intake personnel may make his or her own determination whether the income and family size information is accurate and correct, in the absence of documentation of income. The social worker should so indicate in the patient's file that this determination has been made. In the event that Amedisys is prohibited from obtaining detailed information concerning a particular patient, an appropriate staff member may make a determination of the patient's status as an indigent or charity case based on the totality of the patient's circumstances. As applicable, the indigent or charity patient's file shall also retain the income form filled out by the patient, including written documentation of the patient's income, if any.
 - e. The home health agency should provide a copy of it to any patient upon request and to any patient the social worker or intake personnel deems may benefit from it.

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2. Patients are required to disclose all circumstances surrounding insurance, third party coverage, assets, liabilities, guarantors, and any other factors. Guarantors may include immediate family, relatives, friends, significant others, individuals involved in accidents or liability coverage or the responsible party in the case of a pregnancy.
3. If the patient is eligible for any state or federal assistance and has not applied to the program, application should be made prior to consideration for uncompensated services. Indigent or charity status may be provisionally granted while eligibility for other governmental assistance programs is sought.
4. Patients who fail to cooperate fully in obtaining assistance will be ineligible for uncompensated services and efforts will ensue to collect payment for all services rendered until appropriate income information is obtained to demonstrate qualification for indigent or charity status.
5. Victims of assault must press charges or initiate legal action as appropriate against their assailant to be considered eligible for indigent services.
6. Approval for Indigent Care:
 - Patients meeting guidelines for consideration for indigent or charity care may be prospectively approved by the care center Director of Operations for care up to \$1,000.
 - If the amount of services exceeds \$5,000, the approval of the corporate office or the Senior Vice-President of Operations, or her designee, should be obtained.
 - A log of pre-approved indigent or charity patients and amount of charges for discounted services to such patient shall be maintained.
 - Indigent or charity patients are setup in HCHB with the payer code of Private INDIGENT/Charity. HCHB will automatically mark any visits as non-billable.
 - Separate accounts should be maintained for indigent or charity patients and a patient should not be included in one of these accounts and also in a bad debt accounting category. A patient whose accounts have been placed in a bad debt category or other accounting classification may have his or her charges moved to an indigent or charity account if his income level is determined to qualify for such status at any time prior to legal action being taken against such person.
 - No patient or his or her charges shall be counted as indigent or charity if any legal action has been pursued against such patient, including garnishment, lawsuit, etc., or whose payment history has been submitted to a credit reporting agency. However, collection activities may be pursued that do not involve legal action or credit agency reporting either by Amedisys or third party agents. A determination of income eligibility for indigent or charity status may be made at any time prior to such legal action being taken.
 - Changes in billing or payment practices by an insurer or governmental payer that render a patient ineligible for coverage by such payer may be considered in determining if a patient qualifies for a full or partial discount under this policy.
7. Reporting of Indigent/Charity Care:
 - Where Amedisys has made a minimum indigent/charity care commitment as part of a certificate of need application, indigent and charity care provided by the Company should be credited to the various, respective commitments and reported to the applicable state regulatory agency.
 - In the event that indigent/charity care provided by Amedisys, has not been previously allocated or reported, it may be carried over and applied to subsequent commitment periods.

[Income Document Verification](#)
[Income Document Attestation](#)

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State Specific Requirements

Maryland:

A determination of probable eligibility for charity care and/or reduced fees will be made within two business days after the request is made.

Maryland Sliding Fee Scale

The charitable patient must have an income level less than 125% of the Federal Poverty Guidelines for his or her family size, but less than 400% of the Federal Poverty Guidelines to qualify for a discounted fee. **The Discounted fee will be applied as follows:**

Poverty Level (at or below)	% Discount
125%	100%
150%	90%
175%	80%
200%	70%
225%	60%
250%	50%
275%	40%
300%	30%
325%	20%
350%	10%
375%	5%
400%	5%

Maryland Time Payment Plan

A patient who qualifies for a discounted fee under this policy may request to pay billed charges over time. We ask for a minimum of \$25 per month with the balance being resolved within 1 year from start-of-care.