

Sliding scale discount policy

A. Sliding Scale Discount

- Patients who cannot afford to pay for their medical care may qualify for receiving a discount on the services provided to them at UNHS. In order to be consider for a Sliding Fee Discount(s), a patient must complete UNHS' Sliding Fee Discount Application.
- UNHS may serve patients with third party insurance that does not cover or only partially covers fees for health care services. These patients may also be eligible for the sliding fee discount schedule based on income and family size. In such cases, subject to potential legal and contractual limitations, the charge for each sliding fee discount schedule pay class is the maximum amount an eligible patient in that pay class is required to pay for a certain service, regardless of insurance status.
- Services provided to our patients by our providers at Blue Mountain Hospital are not eligible for a sliding scale discount.
- The flat rate discount for sliding fee are based upon income and family size. Please review the following definitions for income:
 - a. Income refers to the total annual gross cash receipts before taxes from all sources, including money wages and salary before any deductions, but does not include food or rent in lieu of wages. Income includes receipts from self-employed or from owned farms or businesses after deductions for business or farm expenses. Income includes regular payments from public assistance, social security, unemployment and workman's compensation insurance, training stipends, alimony, child support and military family allotments or other regular support from an absent employee, pension, private pension, regular insurance or annuity payments and dividends, interest, rents, royalties, or payments from estates and trusts.
 - b. Income does not refer to the following money receipts: capital gains, assets drawn down as withdrawals from a bank, sale of property, house or car, tax refunds, gifts, lump sum inheritances, one-time insurance payments or compensation for injury. Non-cash income such as fringe benefits, value of food and fuel produced and consumed on farms and imputed value of rent from owner-occupied farm or non-farm housing is also not considered to be income.
 - c. Poverty income guidelines are the figures provided annually by the United States Department of Health and Human Services.
 - d. Household income means the income of all persons residing in a single dwelling or apartment.
 - i. Family is defined as those individuals making up a household (all persons residing in a single dwelling or apartment). Family size is the count of family members making up the household. Please note: the size of one's family may be greater than the one defined here for sliding fee income eligibility; those members of the family cannot be living within the household. Family size can be self-declared on UNHS' Sliding Fee Discount Application includes a signed attestation by the patient that the information is correct.
 - ii. If an individual resides with a family but does not consider himself or herself as part of the family, the individual must demonstrate financial independence from the family to be considered as a sliding fee eligible candidate.
 - iii. If a family has an individual residing in the household, but the family does not consider that person to be a part of the family, the family must demonstrate that the finances of the individual are separate and of no consequence to the family or else the income of the individual is considered as part of the household.
 - iv. Pursuant to the two scenarios above, if an individual demonstrates financial independence from a family, and the individual pays rent to the family, the family must claim rent as income if the family requests to be eligible for the sliding fee discount.
- At the time the patient completes a new registration form, the patient is made aware that charges for service provided may be reduced based upon the patient's ability to pay. The patient will not be turned away based on their inability to pay for services. They will be given a copy of the Sliding Fee Discount Application.
- Patients requesting to receive a discount for services must complete the Sliding Fee Discount Application. Upon completion of the form, the patient should provide to the clinic verification of their income
- Upon completion of the Sliding Fee Discount Application, health center staff will notify the patient to bring in documentation of their income within 30 business days or the next office visit whichever is the least number of days. Failure to provide to us this information may lead to disqualifying the patient for discounted services.
- An approved Sliding Fee Discount Application will be in effect for one-year of application approval date. If the patient income changes during the approved discount year, the patients Sliding Discount eligibility is subject to re-verification and the patient must resubmit the Sliding Fee Discount Application.. Health Center staff will notify the sliding fee patient that their income eligibility will expire at the end of one year, and must be verified should they desire to remain on the Sliding Fee Discount.
- Verification of income may be obtained from any of the following and should be obtained yearly: 1040 forms for the previous calendar year, a copy of the previous year's W-2 and income tax return, letter from employer stating earnings, unemployment check stub, check stubs, social security documentation, child support and/or alimony check stubs, food stamps, or other public assistance. If a patient presents any valid form of public assistance, this will qualify the patient for the discount. However, completion of the Sliding Fee Discount Application is required.
- Income information obtained will be held strictly confidential and will not be shared with any outside entity or individual.
- Please take into consideration that if a candidate for sliding fee just recently lost their job and they are providing to you their 1040 or W-2 forms, their income may be overstated. A more appropriate method for determining income level may be to use their unemployment check stubs.
- Please note that in only rare instances is someone living day to day without any source of food, clothing, or shelter. We are not attempting to be difficult in assigning discount eligibility to patients who need medical care at a reduced rate. Utah Navajo Health System must obtain proof of income from the patient.
- If a patient states he/she does not have any source of income, please review the Sliding Fee Discount Application as there are several pieces of information which will help determine eligibility.
If Utah Navajo Health System is unable to obtain income from the patient, the patient is able to SelfDeclare their income using UNHS' Self-Declaration of Income form located a patient registration
- Self declaration may be used in special circumstances. Patients who are unable to provide written verification must provide a signed statement of income, and why (s) he is unable to provide independent verification. This statement will be presented to UNHS' management for review and final determination as to the sliding fee percentage. Self-declared patients will be responsible for 100% of their charges until management determines the appropriate category.
- Fee waivers may be offered to patients experiencing "Hardship". "Hardship" will be considered on a case-by-case basis and circumstances may include the loss of a patient' family member, homelessness, out of control chronic medical condition, etc. A "hardship" determination will relieve the patient's financial responsibility for the time stated with the "Hardship" review. The Chief Financial Officer or Clinic Manager (if related to health condition) may determine when a patient is thought to be having financial "Hardship".
- If proof of income is unusual, information obtained from the candidate during the income verification process is suspicious, or if a change in level of income in the near future is possible, have the candidate verify their income in two to three months instead of yearly. This procedure should be used sparingly but may be used when unusual circumstances warrant approving income eligibility with reservations. Please document information provided by the patient and indicates that additional information was obtained from the patient. If information provided by the patient indicates a serious or high level of concern on the part of the interviewer, please advise the Office Manager, Finance Manager Medical Director, Chief Financial Officer, or Chief Executive Officer as appropriate. Forward all documentation to the appropriate individual.
- No patient is denied services based on inability to pay.
- UNHS' Board of Directors reviews this policy at least once every three years and ensures that it is patient-centered, improves access to care, and assures that no patient will be denied health care services due to an inability to pay. As part of its review, the Board of Directors: (i) collects utilization data that allows it to assess the rate at which patients within each of its discount pay classes, as well as those at or below 100% of the Federal Poverty Guidelines, are accessing health center services; (ii) utilizes this and, if applicable, other data (e.g., results of patient satisfaction surveys) to evaluate the effectiveness of its sliding fee discount program in reducing financial barriers to care; and (iii) identifies and implements changes as needed.

B. Sliding Fee Discount Table

- This table located at patient registration will be used to determine the patient's discount percentage based upon income and family size. It is to be used after the patient has completed the Sliding Fee Discount Application and their income has been verified. The Discount Table is based on yearly income. If monthly income is gathered, multiply that figure by twelve to arrive at yearly income.
- Find on the Sliding Fee Discount Application and Sliding Fee Table the number of people in the patient's family. From the number of people in the family, sight a line to the income level. From the patient's income level, sight a line up to the discount percentage.
- UNHS will provide a full discount or charge, at most, a fixed nominal charge for individuals and families with annual incomes at or below 100% of the FPG. Individuals and families with annual incomes above 200% of the FPG will not receive a discount under the sliding fee discount schedule. For services provided directly by the health center, UNHS will discount charges for individuals and families with annual incomes above 100% and at or below 200% of the FPG. For each sliding fee discount schedule, there must be at least four discount pay classes and the discounts must be tied to gradations in income level. UNHS will maintain the following sliding fee discount schedules. The nominal charge will meet the following criteria:
 - a. It will be considered "nominal" from the perspective of the patient;
 - b. It will be a fixed charge and not a percentage of the actual charge/cost;
 - c. It will not reflect the true cost of the service(s) being provided;
 - d. It will be no more than the charge paid by a patient in the first sliding fee discount schedule pay class above 100 percent of the Federal Poverty Guideline; and
 - e. It will not reflect a minimum fee or payment threshold.
- In Athena under patient's account under the quick view, enter the Sliding Fee information under "Add sliding fee plan" under insurance tab. The verify date is the date the Sliding Discount application was approved and income was verified. The effective date is the date the application was completed and should be no more than 10 days prior to the verification date. As long as the patient is eligible for the Sliding Discount, the computer will alert health center staff of eligibility upon viewing the patients electronic chart.
- The sliding fee discount will apply to all services within the UNHS approved scope of project, whether required or additional for all of UNHS locations. UNHS does have multiple Sliding Fee Discount Schedules based on services/mode of delivery.
 - a. Services not included in the scope of project are:
 - i. Supplies used during Major Dental services are not covered (crowns, bridges, dentures, and canals)
 - ii. Glasses, Lenses, Contacts (Hardware)
 - iii. Labor and Delivery
 - iv. Audiology
 - v. Echocardiogram
 - vi. Durable Medical Equipment
 - vii. Laboratory results that are sent out to an outside facility as well as Radiology
 - viii. Readings are also not covered via your Sliding Scale Discount. These services will be billed out by the receiving facility
 - ix. Blue Mountain Hospital Services (Emergency Room, Inpatient and Outpatient)
 - x. All Referred Services to an outside facility