

IU HEALTH

Financial Assistance Policy

Patient Financial Services #: (317) 612-2754 or (877) 668-5621

Website: <http://iuhealth.org/patients/billing-center/financial-assistance/>

Charity Care:

- Eligibility for financial assistance is based upon a patient's household income and number of members in the household.
- Full free care is available to patients with incomes at or below 200% of the Federal Poverty Guidelines (FPG).
- Partial free care/limited means is available to patients with incomes at 201%-400% of the FPG based on a sliding fee scale.
- For insured patients, the partial free care/limited means ends at 400% of the FPG.

Medical Hardship Adjustment:

- For uninsured patients with household income that exceeds 400% of the FPG, IU Health will provide partial assistance/limited means adjustment of allowable charges, calculated on a sliding fee scale.
- Amount is based on household income and number in the family.
- For uninsured patients, this ends when their ability to pay reaches the uninsured discount already granted by IU Health.

Presumed Eligibility:

- Patients in the following categories are presumed to be eligible for financial assistance without a determination of household income:
 - o Financial need has been determined by third parties, including Wishard, Project Health, Children's Special Health Care Services, Medicaid, Out-of-State Medicaid;
 - o Patients who are pending Medicaid approval;
 - o Homeless patients; and
 - o Patients who (a) have a hospital bill with a maximum balance to be determined by the Executive Director of Revenue Cycle Services, and (b) meet credit scoring and asset determination criteria.

Additional Requirements:

- For patients eligible for financial assistance with hospital and/or physician bills exceeding \$60,000, IU Health may review available assets in determining eligibility and amount of assistance provided.
- All third-party resources and non-hospital financial aid programs, including Medicaid, must be exhausted before financial aid is awarded.
- Financial assistance may be granted to patients who qualify for government programs when funding has been delayed, but the assistance can be reversed if later government funding is approved.

- Financial assistance may be granted to a deceased patient whose estate has been determined to be without valuable assets.
- Financial assistance will not be granted to balances less than \$240.

Uninsured Patient Discount:

- An uninsured adjustment is based on the average rate of the three best negotiated Managed Care rates, all of which are calculated on an annual basis.
- In 2011, the average rate was 40%.
- Uninsured patients are identified during registration and/or admissions process.
- The adjustment will be automatically applied at the time of billing and will be visible on the initial statement issued for services.
- The adjustment has no impact on a patient's ability to apply or qualify for financial assistance.

Financial Assistance Process and Application

Notification:

- A description of the policy will be posted in emergency departments, registration areas, and on the website, describing the available assistance and directing patients to the application.
- Brochures and other materials may be available in other languages.
- A description of the policy may be included with all patients' bills.
- An application will be mailed to each patient eligible under the uninsured adjustment policy at the end of treatment along with a summary of incurred charges.
- Patients may request an application online or by calling the billings office.
- Employees are informed yearly as to how to refer patients to apply for financial assistance.

Application:

- Patients are given 21 calendar days to complete and return the application.
- Application and further documentation must be submitted annually.
- A financial assistance determination will be made within 90 days.
- A patient granted less than full assistance may submit additional information, and staff may amend a prior determination.
- A patient may appeal the decision via written request to the financial assistance committee.
- A patient whose account has been transferred to a collection agency may request financial assistance.
- Collection activity may be suspended on an account while an application is being processed.
- Assistance will not be provided after an account has entered legal proceedings without first obtaining written consent from Revenue Cycle Services.