



POLICY

St. James Hospital (SJH) serviced by UR Medicine Affiliate Billing Office (CBO) shall have a common and uniform practice to offer Financial Assistance to all individuals, regardless of race, creed, color, sex, national origin, sexual orientation, disability or age, who incur significant

	Office Director or St. James Hospital CFO . Per encounter basis (no window for future eligibility approved).
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Timelines for Application and Determination: Generally, the guarantor or patient must voluntarily ask for financial assistance, and supply information needed to determine eligibility on a timely basis:

- For self-pay (no insurance), within 90 days of the date of service or discharge from the hospital.
- For patient balances after insurance (below), within 90 days from the date of the first statement.

An application will be reviewed and determination made within 30 days from the receipt of the fully completed application.

Patients who are applying for Financial Assistance for the first time and their income meets the program guidelines for a sliding fee scale, all services rendered within the prior 12 months (1 year) from the date of the application will be eligible for the financial assistance. Any balances previously paid by the patient will be refunded on these accounts in the (365 days) look-back.

Self-Pay (No Insurance) Patients: Once approved, where the patient is self-pay, enrollment in Financial Assistance is good for a year from the initial approval date. Accounts placed with outside collections in the same period may be returned and eligible for a financial assistance discount. The patient is asked to supply new information if conditions change that might change the initial eligibility and discount determination and to re-apply before the end of the year. At the end of the year, letters shall be sent out to the approved recipients to alert them of this expiration, and to provide information on re-application to obtain ongoing coverage.

Patient Balances After Insurance: The amount eligible for Financial Assistance shall be the balance after payments and contractual adjustments are posted to the account. No Self-Pay discount or New York Surcharge are also added. Any approved discount after insurance (based on income, family size and residence) are also subject to the following:

- Once approved, where the patient is self-pay, enrollment in Financial Assistance is good for a year from the initial approval date.
- All patients who have insurance coverage (i.e., Federal Insurers, State Insurers, HMO, PPO, Commercial, No Fault or Workers Compensation) and are denied coverage by their insurance company will allow **St. James Hospital (SJH)** to consider appeal/legal action against the insurer before the Financial Assistance Discount will be considered.
- The Financial Assistance Program will not cover co-insurance, co-payments, or deductibles for patients who are eligible for secondary coverage from Medicaid, CHP, FHB, and other similar need-based programs.
- Selected commercial and governmental insurance programs, by contract, may not permit **St. James Hospital (SJH)** to apply Financial Assistance to amounts after insurance payment. The Billing Manager shall ensure such restrictions are communicated to the individuals processing financial assistance applications.

- Patients who have access to traditional medical care coverage (e.g., primary and secondary insurance coverage) must utilize and exhaust their benefits prior to submitting a Financial Assistance application, unless income is such that further discount would not be approved. The Financial Assistance Program is available to assist these patients with co-

The CBO shall utilize automated processing to the greatest degree processing to collect and track applications, approval status, and the determined bracket and associated discount, but where such automation clearly presents the associated calculations.

Special Circumstances:

The Financial Assistance Program discount may be extended in selected circumstances, including:

- A. Deceased patients without an estate or third-party coverage are eligible for Financial

create temporary variations from this policy and should be reviewed at the earliest possibility with **St. James Hospital (SJH)** and corporate leadership.

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regular Financial Assistance Discount criteria in this policy, they do not have the ability to pay their hospital bill. In these situations, there must be complete supporting documentation of the decision, and why the patient did not meet the regular criteria. Some examples of special circumstances and relevant considerations include:
- Single parents or individuals caring for elders
 - Other financial obligations/disabled family member
 - The amount and frequency of billings for healthcare services including obligations outside of UR

Appeals Process: All applicants to the Financial Assistance Program will receive in writing an approval and/or denial notification. Contact information for an appeal if denied is on each notification including special numbers to contact at UR Medicine Affiliate Billing Office and the New York State Centralized Department of Health Hotline: (800)804-5447.

Appeals submitted to **St. James Hospital (SJH)** will be forwarded to the UR Medicine Affiliate Billing Office, or received directly, and all will be reviewed in detail by the UR Medicine Affiliate Billing Office Director. The UR Medicine Affiliate Billing Office Director will work with the Financial Assistance Processors in the CBO in their review of the application and documentation. The initial Financial Assistance Application determination can be overturned by the CBO Director.

Appeal decisions will be sent in writing to the applicant. Where decisions are upheld after review, applicants will be advised to pursue further with the NYS Department of Health

SPECIAL COMMUNICATION CONSIDERATIONS

Timing: All efforts to provide information at a variety of locations using a variety of media and techniques will be attempted. **St. James Hospital (SJH)** and system level services will strive to make the program information available to patients prior to them receiving services; however, it is recognized that in many cases patients will investigate Financial Assistance after services are rendered.

Compliance: Communications may be required to meet regulatory requirements, such as the use of alternate language form and electronic content. The UR Medicine Affiliate Billing Office and Patient Access areas will periodically assess the need for alternate language communications and adapt materials as required.

Verbal: **St. James Hospital (SJH)** and system level will make its best efforts to verbally communicate the program through its associates recognizing that there are levels of associate involvement and ability to effectively engage with patients and guarantors. Scheduling and registration staff will attempt to verbally inform all self-pay patients of this available benefit. There will be informational sheets and applications available for all patients in the registration area. **St. James Hospital (SJH)** Patient Access associates will be given information sheets to assist them with the ability to communicate this program to patients.

Interested persons and/or applicants who do not speak English can contact **St. James Hospital (SJH)**, or the UR Affiliate Billing Office at (585)396-6515, or 1(833)978-8325 and they will contact our Interpreter Service to be able to speak to the interested person and/or applicant in their preferred language as well as interpret the Financial Assistance application.

Written Media:

- Application & Directions ±these documents will provide the patient with the Financial Assistance application and directions as to how to complete the application and the DGGLWLRQDO LQIRUPDWLRQ UHTXLUHG IRU D³FRPSOHW
- Financial Assistance Applications are mailed by the Customer Service Department or Financial Case Managers to all Emergency Room, Urgent Care Center, Inpatients and Observation patients who are registered as self-pay
- Patient Bills & Collection Correspondence ±Patient billing statements will include a statement regarding the existence of the program and who to contact. Similar LQIRUPDWLRQ ZLOO EH LQFOXGHG LQ WKH³FROOHFWLR
- Financial Assistance Applications as well as the Financial Assistance Policy and supporting documentation will be translated into the language for any population that reaches over 5% of total population visits per year.

Electronic (Online) Media includes:

- Intranet ±On **St. James Hospital (SJH)** current or any future system-wide Intranet (intended for physicians and staff) will include this policy and directions in the Policy & Procedure Manual on the Intranet making the policy and program available to all associates.
- Internet Web Site ±**St. James Hospital (SJH)** will include this full policy and a summary of this policy to incorporate general information about the policy, sliding fee application and directions, facility and professional services covered by the policy, financial counseling contact information on their (public) Internet Web Page.

Non-Patient Communication ±**St. James Hospital (SJH)** or CBO will communicate the program with community health & human service agencies and social service organization & agencies (i.e., Office of the Aging, etc.) as well as companies it utilizes in its collection efforts (i.e., collection agencies).

REPORTING, REVIEW AND MONITORING

Patient Access and Finance areas, and counterparts at the facility level along with UR Medicine Affiliate Billing Office will comply with all Federal, State and Financial Standards Accounting Board accounting and reporting requirements as well as make its best effort to follow any voluntary or recommended standards established by New York State Healthcare Associations.

St. James Hospital CFO, or UR Medicine Affiliate Billing Office Director or Regional Patient Access Director as delegated, shall communicate details regarding the program to **St. James Hospital (SJH)** system and its facility Administration, Board of Directors, or Advisory Boards as needed.

St. James Hospital CFO will report on the Financial Assistance program at the system or facility level in its audited financial statement, CMS Institutional Cost Report, or other mandated reporting as well as updating marketing materials.

This policy will be reviewed annually by the UR Medicine Affiliate Billing Office Director, to incorporate the annually published Federal Poverty Level tables by US HHS/CMS in the Federal Register, and as needed for any changes with the publication of any related State or Federal regulations or legislation.

St. James Hospital (SJH) and UR Medicine Affiliate Billing Office will comply with NYCRR Part 86-1.11(g) (ii), section IX and other applicable regulations. This compliance will be

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the **St. James Hospital (SJH)** or system level as needed. The