



## FINANCIAL ASSISTANCE – CHARITY CARE

### ADMINISTRATIVE POLICY

**Campus:** All Swedish Hospital Facilities, Departments & Clinics

**Approved:** April 2014

**Department:** Revenue Cycle

**Next Review:** April 2016

#### Purpose

The purpose of this policy is to outline the circumstances under which financial assistance (also referred to as “charity care”) may be provided to qualifying low income patients for medically necessary healthcare services provided by a Swedish hospital facility or clinic. (Swedish).

#### Policy

Swedish is committed to the provision of medically necessary healthcare services to community members and those in emergent medical need, without delay, regardless of their ability to pay.

1. Swedish will comply with federal and state laws and regulations relating to emergency medical services and charity care.
2. Swedish will provide charity care to qualifying patients to relieve them of all or some of their financial obligation for medically necessary Swedish healthcare services.
3. In alignment with its Core Values, Swedish will provide charity care to qualifying patients in a respectful, compassionate, fair, consistent, effective and efficient manner.
4. Swedish will not discriminate on the basis of age, sex, race, creed, color, disability, sexual orientation, national origin, or immigration status when making charity care determinations.
5. In extenuating circumstances, Swedish may at its discretion approve charity care outside of the scope of this policy.
6. Swedish prohibits the billing of gross charges on any medical care for patients eligible for financial assistance.

**Eligibility Requirements:**

Charity care is typically secondary to all other financial resources available to the guarantor (financially liable individual) including but not limited to insurance, third party liability payors, government programs and outside agency programs. In situations where appropriate primary payment sources are not available or feasible, guarantors may apply for charity care based on the eligibility requirements in this policy.

Charity care is granted for medically necessary services only. For Swedish hospitals, these are appropriate hospital based services as defined by WAC 246-453-010(7).

Charity care is typically only granted for patients who reside in Washington counties where services are provided by Swedish. Exceptions may be made for non-residents in need of emergent services or in situations where a medically necessary service is not performed in the service area where the patient resides.

Eligibility for charity care shall be based on financial need at the time of application. All resources of the family as defined by the WAC <sup>1</sup> are considered in determining the applicability of the Swedish sliding fee scale in Attachment A.

The full amount of charges will be determined to be charity care for any guarantor whose gross family income is at or below 100% of the current federal poverty guideline level (consistent with WAC 246-453), provided that such persons are not eligible for other private or public health coverage sponsorship (see RCW 70.170.060 (5)).

The Swedish sliding fee scale will be used to determine the amount to be written off as charity care for guarantors with incomes between 101% and 400% of the current federal poverty level after all funding possibilities available to the guarantor have been exhausted or denied and personal financial resources and assets have been reviewed for possible funding to pay for billing charges. Charges may be written off as charity care for guarantors with family income in excess of 400% of the federal poverty level when circumstances indicate severe financial hardship or personal loss.

Swedish may choose to grant charity care based solely on an initial determination of a guarantor's status as an indigent person. In these cases, documentation may not be required. In all other cases, documentation is required to support an application for charity care. This may include: proof of income and assets from any source, including but not limited to copies of recent paychecks, W-2 statements, income tax returns, and/or bank statements showing activity. If adequate documentation cannot be provided Swedish may ask for additional information.

**Catastrophic Exceptions**

If a patient is seeking assistance with medical bills but does not meet income qualifications for charity care under the guidelines of the scale, he/she may request a review for a discount based upon catastrophic consideration. If the patient's balance exceeds 10% of a patient's annual income over a one-year period, he/she may be eligible for catastrophic charity care. Catastrophic approvals require department director approval.

**Public Notices:**

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<sup>1</sup> As defined in WAC 246-453-010(17).

Swedish displays signage and information about its Charity Policy at appropriate access areas. This includes paper copies of the policy and application forms which are provided without charge. Brochures are available for dissemination upon request and are available in several languages including but not limited to English, Spanish and Chinese. Swedish publicizes this policy on its website which includes a downloadable plain language summary and application form. Swedish also notifies residents of the community who are most likely to require financial assistance by disseminating information to local organizations.

### **Evaluation Process:**

Patients may apply for charity care at the time of service, or at any point in the billing process up to the resolution of the account. A person seeking charity care will be given a preliminary screening and if this screening does not disqualify him/her for charity care, an application will be provided with instructions on how to apply. As part of this screening process Swedish will review whether the guarantor has exhausted or is not eligible for any third-party payment sources. Where the guarantor's identification as an indigent person is obvious to SHS a prima-facie determination of eligibility may be made and in these cases SHS may not require an application or supporting documentation.

A guarantor who may be eligible to apply for charity care after the initial screening will be given fourteen (14) days to provide sufficient documentation to SHS to support a charity determination. Based upon documentation provided with the charity application, Swedish will determine if additional information is required, or whether a charity determination can be made. The failure of a guarantor to reasonably complete appropriate application procedures shall be sufficient grounds for Swedish to deny charity care.

Swedish will notify the guarantor of a final determination within fourteen (14) business days of receiving the necessary documentation.

The guarantor may appeal the determination of ineligibility for charity care by providing relevant additional documentation to Swedish within thirty (30) days of receipt of the notice of denial. All appeals will be reviewed and if the determination on appeal affirms the denial, written notification will be sent to the guarantor and the Department of Health in accordance with state law. The final appeal process will conclude within thirty (30) days of the receipt of a denial by the applicant.

### **Billing and Collections Information**

Swedish has a separate Billing and Collections Policy (titled "Bad Debt Assignment Policy") which governs the practices for assigning accounts to collection. This policy is available to the public free of charge on the website or upon request.

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## ATTACHMENT A

### Charity Care Percentage Sliding Fee Scale

The full amount of charges will be determined to be charity care for any guarantor whose gross family income is at or below 100% of the current federal poverty guideline level (consistent with WAC 246-453), provided that such persons are not eligible for other private or public health coverage sponsorship (see RCW 70.170.060 (5)).

For guarantors with income and resources above 101% of the FPL the Swedish sliding fee scale below applies.

In determining the applicability of the Swedish sliding fee scale all resources of the family as defined by WAC 246-453-010(17) are taken into account for guarantors with income and assets between 101% and 200% of the FPL.

For guarantors with income and assets above 200% of the FPL household income and assets are considered in determining the applicability of the sliding fee scale.

Income and assets as a percentage of Federal Poverty Guideline Level	Percent of discount (write-off) from original charges	Balance billed to guarantor
101-200%	100%	0%
201-222%	90%	10%
223-244%	80%	20%
245-267%	70%	30%
268-289%	60%	40%
290-311%	50%	50%
312-333%	40%	60%
334-400%	30%	70%