

# Columbus Regional HEALTHCARE SYSTEM

## **Financial Assistance Policy**

**POLICY:** Columbus Regional Healthcare shall provide appropriate levels of care, commensurate with the facility's resources and the community needs. Columbus Regional Healthcare is committed to assisting patients obtain coverage from various programs, as well as providing financial assistance (FA) to every person in need of medically necessary hospital treatment. Columbus Regional Healthcare System will always provide emergency medically necessary care regardless of the patient's ability to pay. Similarly, patients who are able to pay have an obligation to pay and providers have a duty to seek payment from these individuals.

### **OBJECTIVES:**

- To model Columbus Regional Healthcare System's core values of Caring at all times.
- To ensure the patient exhausts other appropriate coverage opportunities prior to qualifying for Columbus Regional Healthcare System's financial assistance.
- To provide financial assistance based on the patient's ability to pay.
- To ensure Columbus Regional Healthcare System complies with any required Federal or State regulation related to financial assistance.
- To establish a process that minimizes the burden on the patient and is cost efficient to administer.

### **DEFINITIONS:**

The terms used within this policy are to be interpreted as follows:

- Amount Generally Billed(AGB): The average amount billed to Columbus Regional Healthcare System insurance companies and Medicare for billable services provided to patients
- Bad Debt: Accounts that have been categorized as uncollectible because the patient has been unable to resolve the outstanding medical debt.
- Balance Allowed (by Insurance or Medicare): The total amount of a claim that is determined to be payable by the insurance company and the subscriber after applying contractual adjustments.
- Elective: Those services that, in the opinion of a physician, are not needed or can be safely postponed.
- Emergency Care: Immediate care which is necessary in the opinion of a physician to prevent putting the patient's health in serious jeopardy, serious impairment to bodily functions or serious dysfunction of any organs or body parts.
- Household Financial Income: Includes income from all members of the household as defined by federal tax guidelines, as measured against annual Federal Poverty Guidelines includes, but is not limited to the following:
  - Annual household pre-tax job earnings

- Unemployment Compensation
- Workers' Compensation
- Social Security and Supplemental Security Income
- Veteran's payments
- Pension or Retirement income
- Other applicable income to include, but not limited to: rent, alimony, child support, and any other miscellaneous source
- Medically Necessary: Hospital services provided to a patient in order to diagnose, alleviate, correct, cure or prevent the onset or worsening of conditions that endanger life, cause suffering or pain, cause physical deformity or malfunction, threaten to cause or aggravate a handicap, or result in overall illness or infirmity.
- Other Coverage Options: Options that would yield a third party payment on account(s) including, but not limited to: Workers' Compensation, governmental plans such as Medicare and Medicaid, State/Federal Agency plans, Victim's Assistance, etc., or third-party liability resulting from automobile and/or other accidents.

Financial Assistance Guidelines

Eligibility Scale

- Full charity care shall be provided to uninsured patients whose Household Financial Income is 150 percent or less of the federal poverty guideline (FPG).
- For financially needy patients whose Household Financial Income is between 151 percent and 400 percent of the FPG, discounts shall be provided to limit such patient's payment obligation to the amount of the patient account balance after subtracting the percentage discount applicable to the patient's FPG household income provided in the following table:

Discount	Current Year Federal Poverty Guidelines for Family Size
100%	Family income is up to 150%
85%	Family income is <b>151%</b> to <b>200%</b> of FPG
75%	Family income is <b>201%</b> to <b>300%</b> of FPG
60%	Family income is <b>301%</b> to <b>400%</b> of FPG

**Documentation Requirements**

Documentation of household size and income is required. Acceptable documents may include:

- Most Recent IRS form 1040
- Pay Check Stubbs from all working individuals in the "household" for the most recent month
- Bank statements for the last three months

If a patient does not or cannot present the information outlined above, the facility may use other evidence to demonstrate eligibility.

If additional information is required from the patient to complete the application, the facility will notify the individual in writing of the information that is missing and provide a reasonable time period for it to be provided.

### *Presumptive eligibility*

Patients who qualify and are receiving benefits from the following programs may be presumed eligible for 100 percent financial assistance:

- **Food stamps.** The U.S. Department of Agriculture Food and Nutrition Service Food Stamp Program.
- **State relief programs.** Some state programs that do not cover medical needs are available to individuals deemed to be living in poverty. Columbus Regional Healthcare System may accept a patient's participation in specific programs as qualification for financial assistance when medical insurance benefits are not available
- **Local Programs.** Some counties offer a financial assistance program designed to provide emergency short-term assistance to persons lacking the resources to meet their basic needs for food, shelter, fuel, utilities, clothing, medical, dental, hospital care and burial. The facility's Financial Assistance Program may provide assistance for hospital charges not covered by these programs.
- Homelessness. Homeless persons qualify for assistance.
- Deceased Patients. Unpaid balances of patients who are deceased with no estate or surviving responsible party qualify for assistance.
- Demographic Analytics. Patient demographics may be compared with a third party database using public information to identify poverty conditions (e.g. PARO score) to determine eligibility for the Financial Assistance Program.

Patients who meet presumptive eligibility criteria may be granted financial assistance without completing the financial assistance application. Documentation supporting the patient's qualification for or participation in a program must be obtained and kept on file. Unless otherwise noted, an individual who is presumed eligible under these presumptive criteria will continue to remain eligible for the Eligibility period outlined below, unless facility personnel have reason to believe the patient no longer meets the presumptive criteria.

### *Eligibility Evaluation Process*

In order to determine the appropriate level of financial assistance to apply to a patient's account, the facility will perform one of the following:

- Utilize a scoring mechanism, with the assistance of a third-party vendor that provides a patient financial profile.
- Document the patient's qualification under other Presumptive Eligibility criteria (described above) on a Financial Assistance application
- Require the patient to complete a financial assistance application

- Household income, as defined above, will be considered in determining whether a patient is eligible for financial assistance

#### *Eligibility Period*

- An individual who is presumed eligible under these criteria will continue to remain eligible for six months following the date of the initial approval, unless information is identified that the patient status has changed and would deem the patient to be ineligible.
- Upon initial approval, the facility will also include accounts as eligible for financial assistance if the first post discharge statement was mailed 240 days or less from the eligibility date.
- Patients will be refunded any amounts they paid that are in excess of the final liability determined to be appropriate after financial assistance adjustments are applied.

#### *Eligible Population*

This policy is applicable to uninsured patients who:

- Are admitted for Emergency Medical Care and for any Medically Necessary care following an Emergency Admission regardless of the location of their household
- Are admitted for medically necessary care and are residents of (insert service areas here)

Patients with active third party insurance coverage (including governmental payers) are not eligible for financial assistance for balances after insurance. However, patients can request discounts for larger balances through the Hardship Settlement Policy.

#### *Eligibility Notification*

After receiving the patient's request for financial assistance and any financial information or other documentation needed to determine eligibility for financial assistance, the patient will be notified of the patient's eligibility determination within a reasonable period of time.

#### *Communication of Financial Assistance Policy*

Columbus Regional Healthcare System widely communicates the availability of financial assistance policy on:

- Facility's website ([www.crhealthcare.org](http://www.crhealthcare.org))
- Billing statements
- Signs posted at conspicuous locations throughout the facility
- Handout materials given at Registration and during Financial Counselor patient interviews.

Full copies of the Financial Assistance Policy may be downloaded from the website listed above or by requesting a copy by mail. The physical address to obtain a copy of Financial Assistance Policy and/or application can be obtained at no cost to patient by submitting a request to:

Columbus Regional Healthcare System  
Financial Counseling Department:  
500 Jefferson St  
Whiteville, NC 28472  
(910) 642-9361

Financial Assistance Policy and Application are available in English and Spanish and any other language that is considered the primary language of any population with limited English proficiency that constitute more than 5% of 1000 persons (whichever is less) of the population served by the facility.

#### Participation by Clinicians who work in Columbus Regional Healthcare System

A listing of Clinicians who are included in this Financial Assistance Policy and those who are not included in this policy can be found in **Addendum A** of this policy, or is available by contacting:

Columbus Regional Healthcare System  
Financial Counseling Department:  
500 Jefferson St  
Whiteville, NC 28472  
(910) 642-9361

#### Patient Responsibilities Regarding Financial Assistance

If applicable, prior to being considered for financial assistance, the patient/family must cooperate with Columbus Regional Healthcare to furnish information and documentation to apply for the Financial Assistance Program, as well as other existing financial resources that may be available to pay for the patient's health care, such as Medicaid, Medicare, third-party liability, etc.

- A patient who qualifies for partial discounts must cooperate with Columbus Regional Healthcare System to establish a reasonable payment plan that takes into account available income and assets, the amount of the discounted bill(s), and any prior payments.
- Patients who qualify for partial discounts must make a good faith effort to honor the payment plans for their discounted healthcare bills. They are responsible for communicating to the provider any change in their financial situation that may impact their ability to pay their discounted healthcare bills or to honor the provisions of their payment plans.

#### **Amount Generally Billed:**

AGB is determined through the "Look-back method" which is calculated as follows:

1. For a 12 month period, the total of all Balances Allowed by insurance and Medicare (including Medicare Advantage plans) is divided by the total of all charges for those services. The percentage is calculated at least annually.

2. The percentage is applied by the 120th day after the end of the 12-month period that Columbus Regional Healthcare used in calculating the AGB percentage.
3. Information on AGB is available and can be obtained at no additional cost by submitting a request to:

Columbus Regional Healthcare System  
Financial Counseling Department:  
500 Jefferson St  
Whiteville, NC 28472  
(910) 642-9361

Additional Information

- Columbus Regional Healthcare System has established a separate Billing and Collection policy which outlines actions that may be taken on balances due from patients. A copy of can be obtained at no cost to patient by submitting a request to:

Columbus Regional Healthcare System  
Financial Counseling Department:  
500 Jefferson St  
Whiteville, NC 28472  
(910) 642-9361

## **Addendum A**

### **Providers Included in Financial Assistance Policy**

#### **Certified Nurse Anesthetist**

Columbus Regional Healthcare System-Surgical Services  
500 Jefferson St  
Whiteville, NC  
28472

#### **Hospitalist Group**

Carolinas Hospitalist Group  
500 Jefferson Plaza  
Whiteville, NC 28472

#### **Hematology & Oncology**

Donayre Cancer Center  
711 North Franklin St  
Whiteville, NC 28472

#### **Neurology**

Solomon, David, MD  
506 Jefferson St  
Whiteville, NC 28472

#### **Nurse Practitioner**

Blankenbeckler, Shannon, NP  
220 Jefferson St, Ste 101  
Whiteville, NC 28472

#### **Pediatrics**

Duke University Medical Center-Department of Neonatology  
Box 2739  
Durham, NC 27710

Carr, Laura, MD  
500 Jefferson St  
Whiteville, NC 28472

Freiji-Mouawad, Rula, MD  
500 Jefferson St  
Whiteville, NC 28472

Mouawad, Dani, MD  
500 Jefferson St  
Whiteville, NC 28472

Norris, Jeanette, MD  
500 Jefferson St  
Whiteville, NC 28472

### **Providers Excluded from Financial Assistance Policy**

#### **Anesthesiology**

American Anesthesiologist  
1301 Concord Terrace  
Sunrise, FL 33323

#### **Cardiology**

Coastal Cardiology Associates  
2150 Shipyard Blvd  
Wilmington, NC 28403

Cape Fear Heart Associates  
1415 Physicians Dr  
Wilmington, NC 28401

#### **Certified Nurse Anesthetist**

Promed Assistance Group  
PO Box 279  
Lewisville, NC 27023

#### **Emergency Medicine**

Schumacher Group  
610 Sycamore St, Ste 310  
Kissimmee, FL 34747

#### **Family Practice**

Chadbourn Family Practice  
104 7<sup>th</sup> Ave  
Chadbourn, NC 28431

G&G Healthcare  
PO Box 250  
7490 Andrew Jackson Hwy  
Cerro Gordo, NC 28430

Hubert, Ana Maria, MD  
500 Jefferson St  
Whiteville, NC 28472



Southeast Primary Care-Tabor City  
14508 James B White Hwy  
Tabor City, NC 28463

Southeast Primary Care  
PO Box 1333  
619 Jefferson St  
Whiteville, NC 28472

Periman, Jason MD  
621 Cherry St  
Charlotte, NC 28204

Smith, Tala, MD  
500 Jefferson St  
Whiteville, NC 28472

Goshen Medical Center  
326 Columbus Corners Dr  
Whiteville, NC 28472

**General Surgery**  
Hutchinson Surgical Care Specialists  
701 Jefferson St  
Whiteville, NC 28472

Walters Surgical Associates  
220 Jefferson St  
Whiteville, NC 28472

Wilmington Plastic Surgery  
1404 Commonwealth Dr, Stes 100-101  
Wilmington, NC 28403

**Internal Medicine**  
Abraha, Surafeal, MD  
500 Jefferson St  
Whiteville, NC 28472

Sigent Healthcare  
109 N. Powell Blvd  
Whiteville, NC 28472

Duggan, Thomas, MD  
7315 Archer's Creek Dr  
Emerald Isle, NC 28594

Farias, Shobha, MD  
369 Jefferson St  
Whiteville, NC 28472

Fortkort, Peter, MD  
500 Jefferson St  
Whiteville, NC 28472

Gearding, David, DO  
500 Jefferson St  
Whiteville, NC 28472

Ghannam, Waseem, MD  
500 Jefferson St  
Whiteville, NC 28472

Leak, Byron, MD  
500 Jefferson St  
Whiteville, NC 28472

McKay, Cecillia, MD  
500 Jefferson St  
Whiteville, NC 28472

Savaliya, Vipul, MD  
500 Jefferson St  
Whiteville, NC 28472

Moonlighting Solutions  
1155 Revolution Mill Dr, Studio 12  
Greensboro, NC 27405

Whiteville Medical Associates  
PO Box 1528  
823 Jefferson St  
Whiteville, NC 28472

**Nephrology**  
Southeastern Nephrology  
1404 Medical Center  
Wilmington, NC 28401

**OB/GYN**  
Medstaff National Medical Staffing  
15200 Weston Pkwy, Ste 104  
Cary, NC 27513

Inge, Jack, MD  
4414 Lake Boone Trail, Ste 300  
Raleigh, NC 27607

Baldwin Woods Gynecology  
627 Jefferson St  
Whiteville, NC 28472

**Ophthalmology**

Whiteville Eye Associates  
810 Spivey Rd  
Whiteville, NC 28472

**Orthopedic Surgery**

Candela, Stephen, MD  
PO Box 1160  
117 E. Maint St  
Whiteville, NC 28472

Columbus County Orthopedics  
604 N Madison St  
Whiteville, NC 28472

**Otolaryngology**

Coastal Carolina ENT  
302 Liberty St  
Whiteville, NC 28472

**Pathology**

Cypress Pathology  
500 Jefferson St  
Whiteville, NC 28472

Pulkingham, Nathan, MD  
1325 W. Davis St  
Burlington, NC 27215

**Physician Assistants**

Columbus Regional Urgent Care  
508 Jefferson St  
Whiteville, NC 28472

**Podiatry**

Peacock Foot Clinic  
325 Jefferson St  
Whiteville, NC 28472

**Psychiatry**

Coastal Carolina Neuropsychiatric Center  
200 Tarpon Trail  
Jacksonville, NC 28546

**Radiology**

Carolinas Regional Radiology  
3186 Village Dr, Ste 201  
Fayetteville, NC 28304

Valley Regional Radiology  
3186 Village Dr Ste 201  
Fayetteville, NC 28304

Kotzan, Jeffrey, MD  
500 Jefferson St  
Whiteville, NC 28472

Bastug, Jeffrey, DO  
500 Jefferson St  
Whiteville, NC 28472

**Urology**

Carolina Urology  
720 Jefferson St  
Whiteville, NC 28472

McCarthy, Roc, DO  
1254 Lillibridge Dr  
Leland, NC 28451

Peterson, Donald, MD  
408 8<sup>th</sup> St  
PO Box 159  
Wilkesboro, NC 28659

