



Charity Care, CICIP and Self Pay Policy and Procedure

I. Policy

As part of our charitable mission, San Luis Valley Health (“SLV Health”) is committed to providing services to the Community. As a non-profit, charitable, community-based healthcare provider, SLV Health will provide services under the Federal Poverty Level put out by the State of Colorado (up to 250% of the FPL.) Many services are provided under the Colorado Indigent Care Program (“CICIP”), a discount program funded by the State of Colorado. Services that are not covered under the CICIP discount program are provided at a sliding fee reduced rate to those who qualify using the Federal Poverty Level (up to 250% of the FPL.)

SLV Health provides care to all patients regardless of age, sex, race, religion, disability, veteran status and national origin. Patient’s ability to pay is considered by SLV Health and assistance in applying for programs such as Medicaid, CHP+, CICIP, Charity Care, Special Grant Funding Programs, Crime/Reparation Funds and other payment sources are available. SLV Health policies comply with eligibility procedures for charity care in accordance with all federal, state and local laws.

All patients presenting for emergency medical care will receive a medical screening exam without regard to their ability to pay, in accordance to applicable federal and state laws. CICIP is always a last resort to most other governmental programs and/or commercial insurances. Charity care applies solely to patients who have no other third party coverage provided by governmental programs and/or commercial insurances. Patients must apply for Charity Care within 90 days from the date of admission. Charity care is neither intended nor meant to apply to the portion of charges that is left as patient responsibility such as co-pays, co-insurances, deductibles and does not apply to non-covered services outlined in the SLV Health internal discount programs. This policy does not apply to charges for services incurred from other providers whose services are coincident to those provided by SLVRMC, e.g. Radiologists, Pathologists, visiting physicians and other services and equipment (DME) not supplied under SLV Health tax identification number.

All patient balances after CICIP, Charity Care and Self Pay discounts are applied are required to be paid at the time of service if charges are available with the exception of emergency medical treatment as outlined by federal and state laws. If charges are not available at time of service payment must be made within 30 days of available charges. Payment arrangements outside of time of service with the exception of emergency medical treatment or within 30 days of available charges can be made at the discretion of the organization on a case by case basis following criteria set forth and is compliant with federal and state laws.

II. Procedural Steps

1. Patient Financial Counselors/Navigators/Customer Service Representatives and other appropriate staff are available to assist patients who would like to apply for Medicaid, CHP+, CICIP, Charity Care, special grant funding programs, Crime/Reparation Funds, and all other payment sources that may be available.
2. Patient Financial Counselors/Navigators/Customer Service Representatives and other appropriate staff will request financial and other information as needed to assist in determining eligibility for assistance that may be available for those that qualify.

3. Patient Financial Counselors/Navigators/Customer Service Representatives and other appropriate staff will use Federal Poverty Level Guidelines up to 250% of the FPL to determine possible eligibility.
4. Patient Financial Counselors/Navigators/Customer Service Representatives and other appropriate staff will provide patients and/or family with guidance through the application process for the above named programs and financial arrangements.
5. Write-off adjustments will be made by the appropriate staff.
6. Once patient responsibility is determined the appropriate staff will send a statement and make appropriate payment arrangements as per the policy.

III. Interpretation of Audits Results/Reporting

1. SLV Health must document and retain documentation as it pertains to the programs listed in the policy.
2. SLV Health must provide internal and external auditors with information pertaining to the above named programs in a timely manner.
3. Audit results must be reported to the above named governmental programs as required, senior leadership as well as the SLV Health Operating Board.

IV. Training

1. Training will be provided to all appropriate staff regarding this policy and procedure.

V. References

1. EMTALA guidelines.
2. CICP guidelines located on the State of Colorado website.
3. Other federal and state agency guidelines as it pertains to Charity Care, CICP and Self Pay discounts and collection practices.

VI. Attachments

1. Colorado Indigent Care Program (CICP) Co-Payment Guide including:
 - Covered (location specific)
 - Non-covered (location specific)
 - Co-payments based on CICP guidelines.
2. SLV Health Internal Discount Programs including the following:
 - Sliding Fee co-payments and percentage discounts.
 - Charity Care percentage discounts.
 - Self Pay Clinic discount.
 - Self Pay Hospital discount.
 - Exclusions and flat rate with discount included.
 - Location specific.

SAN LUIS VALLEY HEALTH REGIONAL MEDICAL CENTER
COLORADO INDIGENT CARE PROGRAM (CICP) CO-PAYMENT GUIDE

***CICP	Emergency Room	IP Hospital/Procedures	Specialty OP	Lab-Imaging	
Rating FPL %	ER Facility Fee Ambulance Fee IP/OBS <24hrs	ER Phys Hospitalist	****IP/OBS 24hrs+ CT, MRI, Nuclear Med Sleep Studies, Stress Tests, Echo	Event-Holter Monitors, Nutrition/Diabetes Services, PFT	Excluding CT, MRI & Nuclear Medicine
**Z 40%	\$ 0	\$ 0	\$ 0	\$ 0	\$0
*N 40%	\$ 15	\$ 7	\$ 7	\$15	\$5
A 60%	\$ 25	\$ 35	\$ 35	\$ 65	\$10
B 81%	\$ 25	\$ 55	\$ 55	\$ 105	\$10
C 100%	\$ 30	\$ 80	\$ 80	\$ 155	\$15
D 117%	\$ 30	\$ 110	\$ 110	\$ 220	\$15
E 133%	\$ 35	\$ 150	\$ 150	\$ 300	\$20
F 159%	\$ 35	\$ 195	\$ 195	\$ 390	\$20
G 185%	\$ 45	\$ 270	\$ 270	\$ 535	\$30
H 200%	\$ 45	\$ 300	\$ 300	\$ 600	\$30
I 250%	\$ 50	\$ 315	\$ 315	\$ 630	\$35

* Clients with an "N" CICP rating have an annual cap of \$120.

*** There may be more than one copay per day based on services rendered

** Homeless and/or AND clients with a "Z" rating are exempt from CICP copayments.

**** Inpatient-Observation facility is one copay per stay

CICP COVERED SERVICES

- INPATIENT
- OBSERVATION
- HOSPITALIST SERVICES
- OUTPATIENT SURGERY
- CRNA SERVICES
- LAB (limit 5 tests per day) unless approved by management.
- RADIOLOGY (limit 2 studies per day CT/MRI) unless approved by management
- CARDIOPULOMONARY
- SLEEP STUDIES, Technical, SLVRMC Techs only
- NUTRITION SERVICES (Dietary/Diabetes Education)
- ER (facility/physician) (Level 1-4)
- PHYSICAL THERAPY, OCCUPATIONAL THERAPY & SPEECH THERAPY (Inpatient Only)
- INFUSION EXCLUDING ADMINISTERED DRUGS
- AMBULANCE

CICP NON COVERED SERVICES

- EMERGENCY ROOM SERVICES THAT ARE NOT EMERGENT/URGENT (Level 5)
- INFUSION DRUGS (Replacement Drug Program)
- SPECIALTY PHYSICIANS
- FAMILY PRACTICE PHYSICIANS
- GENETIC TESTING
- OUTPATIENT PT,OT and SPEECH THERAPY

Effective Date: 7/01/2013

SAN LUIS VALLEY HEALTH REGIONAL MEDICAL CENTER

SAN LUIS VALLEY HEALTH STUART AVE, MONTE VISTA MEDICAL & RMC CLINIC

INTERNAL DISCOUNT PROGRAMS

ALPHA -FPL%	SLIDING FEE	CHARITY CARE	SELF PAY
(Based on CICP Eligibility Criteria)	** ~ Office Visit ~ Specialty Clinic Only (INCLUDED: ENT, OB/GYN, Pediatrics Orthopedics, Internal Medicine and General Surgery)	~Office Visit ~ Procedures	~Hospital~ Technical & Professional (For non CICP qualified patients who meet the CICP FPL % guidelines) OP PT/OT/Speech
		~Clinic only~	~Hospital Only~
		(EXCLUDED: Durable Medical Equipment, Contraceptives Contraceptive Devices.)	
	<i>% of charges expected</i>	<i>% of charges expected</i>	* 25% Discount * 40% Discount
Z - 40%	\$5	10%	30%
N - 40%	\$15	20%	30%
A - 40%	\$25	20%	40%
B - 81%	\$25	20%	40%
C - 100%	\$30	25%	40%
D - 117%	\$30	30%	50%
E - 133%	\$35	35%	50%
F - 159%	\$35	40%	50%
G - 185%	\$45	45%	50%
H - 200%	\$45	50%	50%
I - 250%	\$50	60%	50%

* Discount given at time of service if paid in full. If charges are not available at time of service then discount will still be honored thirty days from when the charges are available.

**EXCLUDED: Allergy Testing, Psychiatry/Counseling, Physiatry, Family Practice, Chiropractic, Durable Medical Equipment, Contraceptives, Contraceptive Devices, genetic Testing, Podiatry and Ophthalmology)

Important Message!!

Certain procedures have a flat rate with discount included and are not subject to the above additional discounts

Effective Date: 7/01/2013

SAN LUIS VALLEY HEALTH CONEJOS COUNTY HOSPITAL

SAN LUIS VALLEY HEALTH LAJARA-ANTONITO CLINICS

COLORADO INDIGENT CARE PROGRAM (CICP) CO-PAYMENT GUIDE

***CICP	Emergency Room	IP Hospital/Procedures	OutPatient	Lab-Imaging	
Rating FPL %	ER Facility Fee IP/OBS <24hrs	ER Phys IP Phys	**** IP/OBS 24hrs+ CT Scan	Physical Therapy OP Physicians/ clinic	Excludes: Send out lab
**Z 40%	\$ 0	\$ 0	\$ 0	\$ 0	\$0
*N 40%	\$ 15	\$ 7	\$ 7	\$15	\$5
A 60%	\$ 25	\$ 35	\$ 35	\$ 65	\$10
B 81%	\$ 25	\$ 55	\$ 55	\$ 105	\$10
C 100%	\$ 30	\$ 80	\$ 80	\$ 155	\$15
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** Homeless and/or AND clients with a "Z" rating are exempt from CICP co-pays. **** Inpatient-Observation facility is one co-pay per stay

CICP COVERED SERVICES

- INPATIENT
- OBSERVATION
- PHYSICIAN SERVICES
- LAB (limit 5 tests per day) unless approved by management.
- RADIOLOGY (limit 2 studies per day CT scan) unless approved by management
- ER (facility/physician) (Level 1-5)
- PHYSICAL THERAPY

CICP NON COVERED SERVICES

- SLEEP STUDIES
- SEND OUT LABS

Effective Date: 7/01/2013

SAN LUIS VALLEY HEALTH CONEJOS COUNTY HOSPITAL
SAN LUIS VALLEY HEALTH LAJARA-ANTONITO CLINICS
INTERNAL DISCOUNT PROGRAMS

ALPHA -FPL%	CHARITY	SELF PAY	
(Based on CICP Eligibility Criteria)	~Hospital~ Technical & Professional (For non CICP qualified)	~Clinic~	~Hospital Only~
	<i>%of charges expected</i>	*25% Discount	* 40% Discount
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I - 250%	50%		

* Discount given at time of service if paid in full. If charges are not available at time of service then discount will still be honored thirty days from when the charges are available.

****EXCLUDED: Sleep studies, send out labs**

Important Message!!

Certain procedures have a flat rate with discount included and are not subject to the above additional discounts

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