

Charity Care Discount Policy

Department	Patient Registration	Origination By	G. Dottery
Unit		Origination Date	April2000
Manual	Patient Financial Services	Date Reviewed	
Function	Charity Care Program	Date Revised	December 2010
		Next Scheduled Review	September 2012

PURPOSE:

The purpose of this policy is to document Alameda County Medical Center's Charity Care Discount program in order to meet the mission of the Medical Center, satisfy the requirements for the Medical Center's participation in specific governmental supplemental programs and adhere to the requirements of State Assembly Bill 774 (enacted January I, 2007).

POLICY:

It is the mission of Alameda County Medical Center to maintain and improve the health of all residents of Alameda County, California, regardless of the ability to pay.

It is the policy of Alameda County Medical Center to offer a charitable discount from full charges for eligible patients who can not afford to pay for the full cost of care and are not eligible for coverage under any other County (CMSP), State, Federal or Commercial plans.

The Charity Care Discount will be applied to all facility (inpatient, outpatient and ancillary) and physician services rendered at Alameda County Medical Center.

All patients must be financially screened for other sources of coverage and meet eligibility qualifications prior to receiving a charity care discount. Patients qualify when their income is lower than 350% of the Federal Poverty level and total assets do not exceed the maximum level set by the Medi-Cal program.

Once approved, patients may qualify for a charity care discount for up to one year. This discount may be applied retroactively for up to six months if there were unavoidable delays in determining eligibility. In addition interest-free payment plans will be offered to patients eligible for a charity care discount and are negotiable between the patient and the Medical Center.

The amount of discount is based on the patient's level of income. Patients with income below 200% of the Federal Poverty Level will receive a 100% discount off total charges. Patients with income between 200% and 350% will receive a 60% discount off total charges. The amount of discount will be no less than the average discount recorded for the current Medicare and Medi-Cal programs.

Patients will be provided information regarding the Charity Care Discount and other financial assistance programs for which the patient may be eligible. A notice of the Charity Discount program will be posted in locations that are visible to the public including the Emergency Department, Billing Office, Admitting and out-patient registration areas. Notices will be provided in English and Spanish.

Charity care discounts will be recorded as an "administrative write-off" in the financial billing and reporting systems

Charity Care Discount Policy

This policy may be subject to change as a result of new state and federal legislation. All revisions will be approved by the Board of Trustees of Alameda County Medical Center.

Charity Care Discount Policy

SELF PAY DISCOUNT POLICY

Department	Patient Registration	Origination By	G. Dottery
Unit		Origination Date	March 2004
Manual	Patient Financial Services	Date Reviewed	
Function	Charity Care Program	Date Revised	December 2010
		Next Scheduled Review	September 2012

PURPOSE:

The purpose of this policy is to document Alameda County Medical Center's Self-Pay Uninsured Discount program in order to meet the mission of the Medical Center, satisfy the requirements for the Medical Center's participation in specific governmental supplemental programs and adhere to the requirements of State Assembly Bill 774 (enacted January 1, 2007).

POLICY:

It is the mission of Alameda County Medical Center to maintain and improve the health of all residents of Alameda County, California, regardless of the ability to pay.

It is the policy of Alameda County Medical Center to offer a self-pay discount from full charges for patients who are not eligible for coverage under any other County (CMSP), State, Federal or Commercial plans and have income greater than 350% of the Federal Poverty Level.

The self-pay discount is applied against all facility (inpatient, outpatient and ancillary) and physician services rendered at Alameda County Medical Center.

All patients must be financially screened for other sources of coverage and meet eligibility qualifications prior to receiving a self-pay discount.

Patients qualify for a self-pay discount at the time of service or related recurring services. Patients will need to be re-screened for services at a later time. This discount may be applied retroactively for up to six months if there were unavoidable delays in determining eligibility.

The discount rate is currently set at 50% from total charges and may be revised at a future date. A deposit may be requested prior to services being rendered.

In addition negotiable interest-free payment plans will be offered to patients eligible for a self-pay discount. Patients will lose the self-pay discount in the event of a payment plan default or referral to a collection agency.

Self-Pay discounts will be recorded as an "administrative write-off" in the financial billing and reporting systems.

This policy may be subject to change as a result of new state and federal legislation. All revisions will be approved by the Board of Trustees of Alameda County Medical Center.