

EASTERN OKLAHOMA MEDIAL CENTER
PATIENT FINANCIAL
POLICY & PROCEDURE MANUAL

Subject: Charity Care Policy

Number: 15

Original Issue Date: 01/98

Revised Date:12/06;12/13; 7/17

PURPOSE

CHARITY CARE POLICY

POLICY

Eastern Oklahoma Medical Center (EOMC) grants consideration to each individual patient regarding his or her ability to pay for medically necessary health care.

The Charity Care Policy may be changed at the discretion of the Chief Executive Officer and/or the Chief Financial Officer of Eastern Oklahoma Medical Center.

SCOPE OF POLICY

This policy shall cover medically necessary health care services provided by all EOMC facilities and medical providers. Patients residing within LeFlore County, Oklahoma are eligible for Charity Care in the form of a discount based on the current Federal Poverty Guideline published at www.hhs.gov/poverty/14.csm

Those persons residing within LeFlore County, Oklahoma could be eligible for Charity Care up to a 100% discount.

Those persons residing outside LeFlore County, Oklahoma are eligible for Charity Care in the form of a discount from charges of 30% if they fall below 300% of the federal poverty level.

Persons not eligible for Charity Care are Non-Oklahoma Residency and Non-Legal Residency of Oklahoma.

Note: Those persons who choose EOMC to provide their medically necessary health care when they have access/availability of services at another facility (such as Choctaw Nation Hospital in Tahihina, OK or the Veterans Administration Medical Center in Muskogee, OK) will be denied charity care discounts.

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DEFINITIONS

Charity Care means either: (1) free care provided to patients who are uninsured/underinsured for the relevant, medically necessary service and who have family incomes not in excess of the Federal Poverty Level. (See attached Schedule A) or (2) discounts from charges afforded patients who are uninsured/underinsured for the relevant service and who have family incomes not exceeding 300%, of the Federal Poverty Level. Such patients also must lack sufficient assets to satisfy their obligations to EOMC.

Uninsured/Underinsured Patient means an individual who lacks adequate health care insurance coverage through: (a) a third party insurer, (b) an ERISA plan, (c) a Federal or State Health Care Program (including without limitation Medicare, Medicaid, and Veterans Administration), (d) Workers' Compensation, Medical Savings Accounts or other coverage for all or any part of the pertinent bill, including claims against third parties covered by insurance to which an EOMC entity is subrogated (if and when such payment is actually made by such insurance company).

ELIGIBILITY DETERMINATION

The Patient Financial Services staff will, upon request, discuss with any patient, prospective patient or guarantor the details of the pertinent policy, and the policy's potential applicability to the circumstances of that patient or prospective patient.

Consideration of patient eligibility for charity health care services may also occur upon the request of the patient or guarantor.

APPLICATION PROCESS

NOTE: Charity Care will be offered to qualified applicants either before services are provided or up to 60 days after the discharge date or date of service.

Once a patient or prospective patient is identified as potentially being eligible for charity care services, the Patient Financial Services staff will provide to the patient or the guarantor a notice of possible qualification for charity care along with a Charity Care Application and Documents Checklist. In order for a formal determination of charity care eligibility to be made, it is necessary for the patient (or guarantor) to provide any and all information being requested, including, but not limited to, demographic and financial information, as well as information documenting income resources and financial assets (e.g., W-2, pay stubs, tax forms, savings account information, etc). The hospital will hold all such financial information in confidence and will use it only for the purpose of evaluating a patient's eligibility for charity care. The Patient

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Financial Services staff will provide aid to those patients needing assistance completing the Charity Care Application and the Documents Checklist. Sign and language interpreters will be provided as warranted in accordance with EOMC's policy.

The financial resources of a parent or guardian may be considered in determining the charity care eligibility of a patient who is a legal dependent.

Patients who do not provide all information necessary to completely and accurately assess their financial situation or who do not cooperate with efforts to secure governmental health care coverage will be deemed ineligible to receive Charity Care. However, EOMC will provide timely, medically necessary treatment even if such cooperation by the patient or patient's guardian is not given.

Applications for charity care falling outside the established guidelines and involving extraordinary circumstances may be considered with the documented approval of the Chief Executive Officer or the Chief Financial Officer.

PARTICIPATION

Patients qualifying for charity care may be granted a discount from charges of up to 100% for medically necessary services.

Patients who are determined to be eligible for a discount from charges of 100% will not be billed by EOMC for medically necessary services.

Patients who are extended charity care in the form of a discount from charges of less than 100% will be afforded written notification of the level of discount to be provided, with the pertinent EOMC bill being adjusted to reflect any such discount. Payment terms will be discussed or agreed upon with the patient or guarantor.

Collection of amounts due from patients receiving Charity Care shall be handled pursuant to the EOMC finance policy on collections. For more information concerning calculation of charges, please contact Patient Financial Services at 918-635-3402.

CALCULATION OF CHARITY CARE DISCOUNT

EOMC personnel will calculate the level of discount to be afforded an uninsured/underinsured patient based upon the patient's household income, family size and financial assets. Personnel shall use the EOMC Charity Care Calculation of Financial Responsibility utilizing the most current Federal Poverty Guideline when determining the level of charity care discounting to be provided the uninsured/underinsured patient. Ten percent of the applicant's Net Asset Value,

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as determined through the use of the Personal Financial Statement and Worksheet, shall be credited as income when determining charity care eligibility and the granting of any related charity care discount.

PUBLIC AWARENESS

EOMC'S charity care policy will be made available to the public.