

Policy: Financial Assistance (Charity Care)

This policy applies to Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health

Effective Date: 05/01/2018

Purpose: Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health is committed to providing financial assistance to persons who have health care needs and are uninsured, underinsured, ineligible for a government program, or otherwise unable to pay for dentally-necessary care based on their household financial situation. Consistent with its mission to deliver compassionate, high-quality, affordable health care services and to advocate for those who are poor and vulnerable, Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health strives to ensure that the financial ability of people who need health care services does not prevent them from seeking or receiving care.

Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health will provide, without discrimination, care of emergency dental conditions to individuals regardless of their ability to pay or their eligibility for financial assistance or for government assistance.

Financial assistance shall be provided to patients who meet program qualifications of Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health. Financial assistance shall be provided, without discrimination, to patients from outside the Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health service areas, who otherwise qualify for the program, and who present with an urgent, emergent or life-threatening condition.

Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health will use the most current Federal Poverty Guidelines to determine eligibility under its financial assistance policy. Patients qualifying for financial assistance may receive fully discounted care or pay a discounted fee under this policy.

This financial assistance policy complies with applicable federal, state, and local laws. Financial assistance is extended with the expectation that patients will cooperate with Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health procedures for applying for such financial assistance or other forms of payment. They will also contribute to the cost of their care according to their ability to pay. Individuals with the financial capacity to purchase health insurance shall be encouraged to do so, as a means of assuring access to health care services, for their overall personal health, and for the protection of their individual assets. Access to insurance or Medicaid coverage has expanded significantly through the federal and state Health Exchanges. It is expected that any uninsured patient cooperate with Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health in determining the availability of Medicaid or insurance coverage.

Accordingly, this written policy:

- Includes eligibility criteria for financial assistance – fully or partially discounted care.
- Describes the basis for calculating amounts charged to patients eligible for financial

assistance under this policy.

- Describes the method by which patients may apply for financial assistance.
- Describes the methods to be used to widely publicize the policy within the communities served by Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health care sites.

Scope: This policy applies to all persons working for or on behalf of Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health. This policy applies to all Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health clinical sites.

In order to manage its resources responsibly and to allow Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health to provide the appropriate level of assistance to persons in need, the Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health Board of Directors establishes the following financial aid guidelines.

Definitions: For the purpose of this policy, the following terms are defined:

Discounted Care — financial assistance that provides care at a discounted fee to eligible patients with annualized family incomes between amounts less than or equal to 200% of the Federal Poverty Guidelines. This type of financial assistance reduces the patient financial obligation. The Discounted Care amounts are outlined Dental Fee Schedule Document.

Eligibility Determination Period — for purposes of determining financial assistance eligibility, Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health will review annual family income from the prior three-month period and/or the prior tax year as shown by recent pay stubs or income tax returns and other information. Proof of earnings may be determined by annualizing the year-to-date family income, taking into consideration the current earnings rate.

Eligibility Qualification Period — patients determined to be eligible shall be granted financial assistance for a period of twelve months. Financial assistance will also be applied to eligible accounts incurred for services received prior to the financial assistance application date.

Family — as defined by the U.S. Census Bureau, a group of two or more people who reside together and who are related by birth, marriage or adoption. If a patient claims a dependent on their income tax return, according to the Internal Revenue Service rules, that individual may be considered a dependent for the purposes of determining eligibility. Any and all resources of the household are considered together to determine eligibility under the Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health financial assistance policy.

- Family Income: Family Income is determined using the U.S. Census Bureau

definition when determining eligibility based on the Federal Poverty Guidelines.

- Includes earnings, unemployment compensation, workers' compensation, Social Security, Supplemental Security Income, public assistance, veterans' payments, survivor benefits, disability payments, pension or retirement income, interest, dividends, rents, royalties, income from estates and trusts, educational assistance, alimony, child support, financial assistance from outside the household, and other miscellaneous sources;
- Non-cash benefits (i.e. Medicare, Medicaid, and Supplemental Nutrition Assistance Program (SNAP) benefits, heat assistance, school lunches, housing assistance, need-based assistance from non-profit organizations, foster care payments, or disaster relief assistance) are not counted as income for making an eligibility determination for financial assistance;
- Capital gains or losses;
- Determined on a before-tax basis;

A person's family income includes the income of all adult family members. For patients under 18 years of age, family income includes that of the parents and/or step-parents, unmarried or domestic partners, or caretaker relatives.

Federal Poverty Guidelines — Federal Poverty Guidelines are updated annually in the Federal Register by the United States Department of Health and Human Services under authority of subsection (2) of Section 9902 of Title 42 of the United States Code. Current guidelines can be referenced at <http://aspe.hhs.gov/POVERTY/>. Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health updates its federal poverty table annually on April 1st.

Financial Assistance — assistance provided to patients for whom it would be a financial hardship to fully pay the expected out-of-pocket expenses for dentally-necessary services provided by Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health and who meet the eligibility criteria for such assistance.

Gross Charges — the total charges at the organization's full established rates for the provision of patient care services before deductions from revenue are applied.

Guarantor — an individual other than the patient who is responsible for payment of the patient's bill.

Reasonable Payment Plan — an extended payment plan that is negotiated between Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health and patient for any patient out-of-pocket fees. The payment plan shall take into account the patient's income and assets, the amount owed and any prior payments.

Uninsured Patient — an individual having no third-party coverage by a commercial third-party insurer, an ERISA plan, a Federal Health Care Program (including without

limitation Medicare, Medicaid, SCHIP and CHAMPUS), Worker's Compensation, or other third party assistance to assist with meeting his/her payment obligations.

Underinsured Patient — an individual, with private or public insurance coverage, for whom it would be a financial hardship to fully pay the expected out-of-pocket expenses for dental services provided by Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health.

Policy: Eligible Services

Services and goods eligible under this financial assistance policy include the following:

1. Dentally necessary services scheduled in advance and assessed and approved at the discretion of Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health.

Services not eligible for financial support include the following:

1. Elective procedures not dentally necessary including, and not limited to, cosmetic services.
2. Other care providers not billed through Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health (e.g. independent physician services, private-duty nursing, ambulance transport, etc.). Patients must contact the service providers directly to inquire about assistance and negotiate payment arrangements with these practices.

Eligibility and Assistance Criteria

Financial assistance shall be extended to patients, or a patient's guarantor, in accordance with the Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health mission and values. Eligibility for financial assistance shall be considered for those individuals who are uninsured, underinsured and unable to pay for their care, based upon a determination of financial need in accordance with this Policy. When determining patient eligibility, Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health does not take into account race, gender, age, sexual orientation, religious affiliation, social or immigrant status, or age of the patient's account.

Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health shall provide financial assistance to patients, or a patient's guarantor, in compliance with federal, state and local laws. Financial assistance shall be based on financial need and shall not take into account race, ethnicity, religion, creed, gender, age, social or immigration status, sexual orientation or insurance status.

Applicants for financial assistance are responsible for applying to public programs for available coverage. They are also expected to pursue public or private health insurance coverage for care provided by Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL

Health. The patient's, or a patient's guarantor's, cooperation in applying for applicable programs and identifiable funding sources, including COBRA coverage (a federal law allowing for a time-limited extension of health care benefits), shall be required. If Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health determines that COBRA coverage is possible, and the patient is not a Medicare or Medicaid beneficiary, the patient or patient's guarantor, shall provide Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health with information necessary to determine the monthly COBRA premium. They will be expected to cooperate with Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health staff to determine whether they qualify for Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health COBRA premium assistance, which may be offered for a limited time to assist in securing insurance coverage.

Patients, or patients' guarantors, who do not cooperate in applying for programs that may pay for their health care services such as Medicaid, may be denied financial assistance. Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health shall make affirmative efforts to assist a patient or patient's guarantor, apply for public and private programs.

The Federal Poverty Guidelines shall be used for determining a patient's eligibility for financial assistance. Eligibility for financial assistance will be based on a combination of family income and assets.

Discounted Care: For eligible services, care will be discounted and a patient, or patient's guarantor will receive a discount provided that they meet the following criteria:

1. Uninsured and underinsured patients meeting other eligibility criteria and whose annualized

family incomes fall between amounts less than or equal to 200% of the Federal Poverty Guidelines, and

2. All other payment options have been exhausted for the patient including private coverage,

federal, state and local dental assistance programs, and other forms of assistance provided by third-parties.

Dental Hardship: While financial assistance is typically provided in accordance with the established criteria, it is recognized that there may occasionally be a need for granting additional support based on extenuating circumstances. All determinations are made on a case-by-case basis based on medical necessity of dental procedures.

Payment Plans: A reasonable payment plan will be established between Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health and the patient, or patient's guarantor, for any balance remaining after the cost of care has been discounted under the financial assistance policy.

Emergency Dental Services

Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health care sites shall provide individuals requesting emergency care at a flat rate outlined in the Dental Fee Schedule. A dental screening examination to determine whether an emergency dental condition exists.

Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health care sites shall treat an individual with an emergency dental condition until the condition is resolved or stabilized and the patient is able to provide self-care following discharge.

Applying for Financial Assistance

Financial assistance eligibility determinations will be made based on the Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health policy. Uninsured and underinsured patients will be informed of the financial assistance policy and the process for submitting an application. Patients, or patients' guarantors, have a responsibility to cooperate in applying for financial assistance by providing information and documentation on family size, income and assets.

Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health will make affirmative efforts to help patients, or a patients' guarantors, apply for public programs, private programs and COBRA coverage, for which they may qualify and that may assist them in obtaining and paying for health care services. Patients identified as potentially eligible will be expected to apply for such programs.

Information on external coverage and the financial assistance policy of Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health will be communicated to patients in a manner that is easy to understand, culturally appropriate and in the most prevalent languages used in their communities.

Application and Documentation: All applicants must complete the Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health Financial Assistance application form and provide requested documents when applying for financial assistance. Documentation may include:

1. Income information such as recent pay stubs, supporting documentation for self-employment

income, the most recent income tax return and bank statements.

Requests for financial assistance shall be processed promptly, and Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health shall notify the patient or applicant verbally. If denied eligibility for any of the financial assistance offered by Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health, the patient may re-apply whenever there has been a change of income or status. A financial assistance application may also be re-submitted at subsequent times of service if the most recent financial assistance determination was

made more than one year prior.

Financial Assistance Approvals

Financial assistance determinations will be made according to the approved policy and in a manner that reflects financial stewardship and social responsibility. Adjustments will follow the levels as established in the Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health policy.

Timeline for Establishing Financial Eligibility

Every effort will be made to determine a patient's, or patient's guarantor's, eligibility. Determination for financial support can be made during any stage of the patient's visit to the clinic or during the collection cycle.

Information on the Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health financial assistance policy will be made available to care site staff. Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health will educate associates who work closely with patients (including those working in patient registration and admitting, financial assistance, customer service, billing and collections) about financial assistance and collection policies and practices. Referral of patients for financial assistance may be made by any Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health associate or dental staff, including physicians, nurses, financial counselors, social workers, case managers, chaplains and religious sponsors.

A request for financial assistance may be made by a patient, a patient's guarantor, a family member, close friend or associate of the patient, subject to applicable privacy laws. Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health will also respond to any oral or written requests for more information on the financial assistance policy made by a patient or any interested party.

Appeals and Dispute Resolution

Patients may seek a review from Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health in the event of a dispute over the application of this financial assistance policy. Patients denied financial assistance may also appeal their eligibility determination.

Disputes and appeals may be filed by contacting the clinic's business office. The basis for the dispute or appeal should be in writing and submitted within six months of the patient's experience giving rise to the dispute or notification of the decision on financial assistance eligibility.

Record Keeping

Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health will document any and all financial assistance in order to maintain proper controls and meet all internal and external compliance requirements.

Actions in the Event of Non-Payment

Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health will make certain efforts to provide uninsured patients with information about our financial assistance policy, such as including a summary of it with billing statements, before Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health or our collection vendors take certain actions to collect payment. Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health collection policies shall comply with federal and state regulations and laws governing health care billing and collections. No documentation information obtained through the application process will be used for collection actions.

No extraordinary collection actions will be pursued against any patient within 150 days of issuing the initial bill or without first making reasonable efforts to determine whether that patient is eligible for financial assistance. Reasonable efforts shall include, but not be limited to, validating that the patient owes the unpaid bills and that all sources of third-party payments have been identified and billed Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health. Reasonable efforts also include a prohibition on collection actions pursued against an uninsured patient (or one likely to be underinsured) until the patient has been made aware of the care site's financial assistance policy and has had the opportunity to apply for it or has availed themselves of a reasonable payment plan. The care sites will refrain from extraordinary collection actions against a patient if s/he provides documentation that s/he has applied for health care coverage under Medicaid, or other publicly-sponsored health care programs.

As outlined in separate billing and collection policy, Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health may pursue collection actions against patients found ineligible for financial assistance, patients who received discounted care or dental hardship discounts but are no longer cooperating in good faith to pay the remaining balance, or patients who have established payment plans but are not in accordance with the payment plan. All collection practices of Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health follow the Fair Debt Collection Practice Act as amended by Public Law 104-208, 110 Stat. 3009.

Policy Approval

The Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health financial assistance policy is subject to periodic review. Any changes to the policy must be approved by the Marian Clinic, Inc. d/b/a Marian Dental Clinic - SCL Health Board of Directors.

References:

- None

Other Related Policies:

- None

Supporting Documents:

- Contact Information; Krista Hahn, Executive Director, 785.233.2800 x109
- Dental Fee Schedule; discounts/fees subject to change periodically.

Monitoring: None