Financial Assistance - Professional Billing (12/2024)



Applicability

This policy applies to ECU Health Medical Center, Outer Banks Health Hospital, ECU Health Beaufort Hospital, a campus of ECU Health Medical Center, ECU Health Bertie Hospital, ECU Health Chowan Hospital, ECU Health Duplin Hospital, ECU Health Edgecombe Hospital, ECU Health Roanoke-Chowan Hospital, ECU Health North Hospital, ECU Health Surgicenter, ECU Health Physicians-Community, ECU Health Home Health and Hospice, and ECU Health Physicians-Academic.

Additionally, this policy applies to North Carolina and non-North Carolina residents related to the professional charges that they incur from services received at ECU Health.

Policy

The Central Business Office (CBO) for ECU Health will engage in the evaluation of patients' accounts for Financial Assistance eligibility. If you receive help from the Financial Assistance Program (FAP), we will not charge more than the amounts generally billed to patients who have insurance for emergency or other medically necessary care. ECU Health uses a look back method based on claims allowed by Medicare fee-for-service and all private health insurers that pay claims to our hospital during the prior 12-month period to determine the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care. (See below for exclusions)

Definitions

Federal Poverty Level (FPL) is a measure of income issued every year by the Department of Health and Human Services (HHS). Federal poverty levels are used to determine eligibility for financial assistance and charity allocations.

Plain Language Summary means a written statement that notifies an Individual(s) that ECU Health offers financial assistance under the FAP for services and contains the information required to be included in such statement under the FAP.

Completion Deadline means the date after which ECU Health or collection agency may initiate or resume an ECA against an Individual(s) who has submitted an incomplete FAP if that Individual(s) has not provided the missing information and/or documentation necessary to complete the application or denied application. The Completion Deadline must be specified in a written notice and must be no earlier than the later of (1) 30 days after ECU Health provides the Individual(s) with this notice; or (2) the last day of the Application Period.

ECU Health maintains three (3) types of financial assistance:

- A. Charity Care
- **B.** Payment Plans
- C. Medicaid Screening

Charity Care

There are two (2) types of Charity Care: Income-based and Non-income based. Patients qualify for Charity Care based on the following:

1. Income-based

A. Presumptive eligibility process

The balance is written-off at or after day 160 based on income less than or equal to 200% FPL.

B. Application-based process

- Utilized by individuals who would like to request that all or a portion of their balance be
 written-off based on income and family size. They can retrieve an application on the ECU Health
 website or they can contact the Customer Service department to obtain an application via mail or
 secure email.
- ECU Health requires patients to submit documentation or verification that they meet the eligibility criteria.
- The following ranges are applied for evaluating applications and adjusting accounts:
 - o Discount of 100% for individuals with incomes below 200% FPL.
 - Patients with an income ranging from 201% to 300% of the FPL are eligible for Financial Assistance, with their household patient responsibility limited to 2% of the household income.
 - Patients with an income ranging from 301% to 400% of the FPL are eligible for Financial Assistance, with their household patient responsibility limited to 3% of the household income.
- ECU Health discounts must be applied to the amount the patient owes (i.e. accounting for contractual allowances and insurance payments, if applicable) or the "amount generally billed" for uninsured individuals.
- ECU Health will consistently apply discounts to uninsured and insured individuals.

2. Non-income based

A. Presumptive eligibility process

- There are occasions in which a patient may appear eligible for charity care consideration, but there is no financial assistance information available to support the determination.
- Some patients are presumed eligible for charity care based on individual life circumstances (e.g., homelessness, patients with minimal or no income and no assets, etc.).
- Balances are adjusted on the accounts deemed eligible for presumptive charity, and the remaining accounts are referred to an outside collection agency.
- Once the agency has had the accounts for six months and has deemed them uncollectible, accounts with balances of \$1,580.00 and less will be returned. Accounts with balances greater than \$1,580.00 will remain with the agency and will remain on the patients' credit files.
- Accounts returned as uncollectible will be placed in a unique financial class and will not be pursued for collections.

Although guidelines are herein previously outlined, accounts will be evaluated on an individual basis.

Payment Plans

• ECU Health manages a patient payment plan program as outlined in Payment Plans.

Medicaid Screening

• ECU Health manages a Medicaid screening process as outlined in Financial Counseling.

2024 FEDERAL POVERTY GUIDELINES

Effective as of January 2024

200% of the Federal Poverty Level Guidelines	
Family Size	Annual
1	\$30,120.00
2	\$40,880.00
3	\$51,640.00
4	\$62,400.00
5	\$73,160.00
6	\$83,920.00
7	\$94,680.00
8	\$105,440.00
For each additional person, add \$10,760	

Exclusions

- Cosmetic / Elective procedures may not be eligible for charity write off.
- Charges that are covered by health insurances or by other third-party payers are not eligible for charity write off.