



Pediatric Associates

Sliding Fee Discount Program Policy

Pediatric Associates of Pikeville offers a Sliding Fee Discount Program to all who are unable to pay for their services. SMC bases program eligibility on a person's ability to pay and will not discriminate on the basis of an individual's race, color, sex, national origin, disability, religion, age, sexual orientation, or gender identity. The Federal Poverty Guidelines are used in creating and annually updating the sliding fee schedule (SFS) to determine eligibility. This program is designed to provide free or discounted care to those who have no means, or limited means, to pay for their medical services (Uninsured or Underinsured).

PROCEDURE:

The following guidelines are to be followed in providing the Sliding Fee Discount Program.

1. Notification: Pediatric Associates of Pikeville will notify patients of the Sliding Fee Discount Program by:

- SFS Information and Application will be available to all uninsured patients at the time of service.
- Notification of the Sliding Fee Discount Program will be offered to each patient upon admission.
- Sliding Fee Discount Program application will be included with collection notices sent out by Pediatric Associates of Pikeville.
- An explanation of our Sliding Fee Discount Program and our application form are available on Pediatric Associates of Pikeville website.
- Pediatric Associates of Pikeville posts notification of Sliding Fee Discount Program in the clinic waiting area.

2. All patients seeking healthcare services at Pediatric Associates of Pikeville are assured that they will be served regardless of ability to pay. No one is refused service because of lack of financial means to pay.

3. Request for discount: Requests for discounted services may be made by patients, family members, social services staff or others who are aware of existing financial hardship. The Sliding Fee Discount Program will only be made available for clinic visits. Information and forms can be obtained from the Front Desk.

4. Administration: The Sliding Fee Discount Program procedure will be administered through the Billing Manager or his/her designee. Information about the Sliding Fee Discount Program policy and procedure will be provided and assistance offered for completion of the application. Dignity and confidentiality will be respected for all who seek and/or are provided healthcare services.

5. Alternative payment sources: All alternative payment resources must be exhausted, including all third-party payment from insurance(s), federal and state programs.

6. Completion of Application: The patient/responsible party must complete the Sliding Fee Discount Program application in its entirety. By signing the Sliding Fee Discount Program application, persons authorize Pediatric Associates of Pikeville access in confirming income as disclosed on the application form. Providing false information on a Sliding Fee Discount Program application will result in all Sliding Fee Discount Program discounts being revoked and the full balance of the account(s) restored and payable immediately.

If an application is unable to be processed due to the need for additional information, the applicant has two weeks from the date of notification to supply the necessary information without having the date on his/her application adjusted. If a patient does not provide the requested information within the two-week time period, his/her application will be re-dated to the date on which s/he supplies the requested information. Any accounts turned over for collection as a result of the patient's delay in providing information will not be considered for the Sliding Fee Discount Program.

7. Eligibility: Discounts will be based on income and family size only. Pediatric Associates of Pikeville uses the Census Bureau definitions of each.
 - a. Family is defined as: a group of two people or more (one of whom is the householder) related by birth, marriage, or adoption and residing together; all such people (including related subfamily members) are considered as members of one family.
 - b. Income includes: earnings, unemployment compensation, workers' compensation, Social Security, Supplemental Security Income, public assistance, veterans' payments, survivor benefits, pension or retirement income, interest, dividends, rents, royalties, income from estates, trusts, educational assistance, alimony, child support, assistance from outside the household, and other miscellaneous sources.
8. Income verification: Applicants must provide one of the following: prior year W-2, two most recent pay stubs, letter from employer, or Form 4506-T (if W-2 not filed). Self-employed individuals will be required to submit detail of the most recent three months of income and expenses for the business. Adequate information must be made available to determine eligibility for the program.
9. Discounts: Those with incomes at or below 100% of poverty will receive a full 100% discount. Those with incomes above 100% of poverty, but at or below 200% of poverty, will be charged according to the attached sliding fee schedule. The sliding fee schedule will be updated during the first quarter of every calendar year with the latest Federal Poverty Guidelines.
10. Nominal Fee: Patients receiving a full discount will be assessed a \$40 nominal fee per visit. However, patients will not be denied services due to an inability to pay. The nominal fee is not a threshold for receiving care and thus, is not a minimum charge or co-payment.
11. Waiving of Charges: In certain situations, patients may not be able to pay the nominal or discount fee. Waiving of charges may only be used in special circumstances and must be approved by Pediatric Associates of Pikeville Administrator, Billing Manager, or their designee. Any waiving of charges should be documented in the patient's file along with an explanation (e.g., ability to pay, good will, health promotion event).
12. Refusal to Pay: If a patient verbally expresses an unwillingness to pay or vacates the premises without paying for services, the patient will be contacted in writing regarding their payment obligations. If the patient is not on the sliding fee schedule, a copy of the sliding fee discount program application will be sent with the notice. If the patient does not make effort to pay or fails to respond within 60 days, this constitutes refusal to pay. At this point in time, Pediatric Associates of Pikeville may explore options not limited, but including offering the patient a payment plan, waiving of charges, or referring to collections.
13. Record keeping: Information related to Sliding Fee Discount Program decisions will be maintained and preserved in a centralized confidential file located in the Billing Manager's Office, in an effort to preserve the dignity of those receiving free or discounted care.