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St. Croix

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Owner Nicky Gehrman:

Director -Revenue Cycle

Area Business Office

Financial Assistance Policy

PURPOSE:

St. Croix Health offers financial help to our patients who cannot pay all or part of their medical bills. As a result, our Financial Assistance Policy (referred to as "FAP" or "Policy") is available to uninsured or underinsured patients based on their ability to pay for emergency and other medically necessary care at our hospital and/or community clinics. Our Financial Assistance Policy is meant for short-term assistance and is not intended as a replacement for insurance coverage. An application for financial assistance is valid for 6 months. The policy describes eligibility criteria, how we calculate discounts, how to apply for financial assistance, the providers delivering care in our Hospital which are covered under this policy, and our emergency medical care policy.

PROCEDURE:

ELIGIBILITY CRITERIA:

St. Croix Health has established the following eligibility criteria for patients to receive financial assistance:

- All patients/guarantors who seek emergent and/or medically necessary services from St. Croix Health can apply.
- The patient must complete the SCH Financial Assistance Application and supply all requested documentation.
- St. Croix Health shall review and evaluate each applicant's situation in order to make a
 determination on eligibility for financial assistance. SCH will look at the following to make a
 determination:
 - Size of Family/Household

- Family is defined as: a group of two or more people related by birth, marriage, or adoption and reside together or are claimed as a dependent on the applicant's tax return.
- Family/Household income
 - Family/Household income includes; gross earnings, tips, income from business and self-employment, unemployment compensation, workers' compensation, Social Security, Supplemental Security Income, veterans' payments, survivor benefits, pension or retirement income, interest, dividends, income from rental properties, estates, trusts, royalties, educational assistance, alimony, child support, assistance from outside the household, and other miscellaneous sources. Noncash benefits (such as food stamps and housing subsidies) do not count.
- Before applying for financial assistance, the patient may be asked to provide evidence that they have been or would be denied government benefits, such as Medicaid.

HOW TO APPLY FOR FINANCIAL ASSISTANCE:

- Obtain a copy of our Policy & Financial Assistance Application one of the following ways:
 - In person at all registration locations
 - Printed from our website at https://www.saintcroixhealth.org/patients-visitors/ insurance-billing/financial-assistance
 - Request a copy by mail from our Patient Financial Services department at 715-483-0475. We are open Monday-Friday from 8:00a.m. to 4:30p.m.
- Patients must complete the Financial Assistance Application, provide appropriate income verification(s), and return to Patient Financial Service one of the following ways:
 - In person or mail to: St. Croix Health, Attention: Financial Counselors, 235 State
 Street. St. Croix Falls. WI 54024
 - By fax to Patient Financial Services at 715-483-0505
- Appropriate household income verification(s) to be provided must include the following:
 - Most recent filed copy of Federal Tax Return.
 - Pay check stubs with year-to-date earnings (last 60 days).
 - Annual statement of Social Security benefits, or bank statements that show the direct deposit. (if applicable)
 - If disabled or unable to work, documentation that patient has applied for disability coverage and has received a coverage determination. (if applicable)
 - Proof of year-to-date child support or alimony payments. (if applicable)
 - Statement of income from any private or government agency that provides you benefits: (pension, grants, scholarships, workers compensation).
 - If the patient is deceased, third party documentation that there is no estate to file a

- claim. (if applicable)
- Additional information may be requested to make a complete determination of income.
- Patients may contact Patient Financial Services at 715-483-0475 with questions about the application or to arrange/schedule an appointment with a Financial Counselor. We are open Monday-Friday from 8:00a.m. to 4:30p.m.

BASIS FOR CALCULATING FINANCIAL ASSISTANCE:

- St. Croix Health provides assistance to all uninsured and under-insured patients whose family income is less than or equal to 200% of the Federal Poverty Level (FPL). Patients meeting this criteria will receive a 100% financial assistance discount.
- Patients with a gross family income above 200% of the FPL, but not more than 300% of the
 FPL will receive partial financial assistance based on the Financial Assistance Table. The
 Financial Assistance Table is updated annually and is based upon that year's Federal Poverty
 Guidelines. Please refer to Appendix A Financial Assistance Table.
- Following a determination of financial aid eligibility, a financial aid-eligible individual will not be charged more than the amount generally billed (AGB) to individuals who have insurance for emergency or medically necessary care.

PRESUMPTIVE ELIGIBILITY

St. Croix Health may presumptively determine that a patient is eligible for financial assistance based on a prior eligibility determination or meeting certain circumstances for financial assistance, which include:

- Homelessness
- Medically necessary services not covered or payable under a Medicaid program or federal grant rendered to a qualified recipient
- · Qualification and effective date for Medicaid subsequent to the services date
- Deceased and no surviving spouse

Excluded services include elective services (cosmetic services or other non-medically necessary), hearing aids, supplies, pharmaceuticals, retail services, as well as balances that should be paid by insurance like Medicare, Medicaid, automobile, workers' compensation or liability insurance.

St. Croix Health may choose to grant presumptive eligibility to patients in rare or unusual situations not specifically set forth in this FAP. In making presumptive eligibility determinations, if the presumptive discount is not the most generous discount available, St. Croix Health will notify patients and give a reasonable amount of time for the patients to personally apply for financial assistance.

LIST OF PROVIDERS COVERED IN FINANCIAL ASSISTANCE

St. Croix Health is required to list all providers, other than the Hospital itself, delivering emergency or other medically necessary care in the Hospital and specify which providers are covered by this Policy

and which are not. The list of providers covered in our Financial Assistance Policy is attached as **Appendix B**. This list will be updated quarterly per IRS rules and regulations under 501(r).

EMERGENCY MEDICAL CARE POLICY

St. Croix Health provides care, without discrimination, for emergency medical conditions to patients regardless of their ability to pay or eligibility for financial assistance. The Hospital prohibits any action(s) that discourage patients from seeking emergency medical care. Examples of prohibited conduct include: an employee or agent of the Hospital demanding that emergency department patients pay before receiving treatment for emergency medical care, or permitting debt collection activities that interfere with the provision of emergency medical care.

St. Croix Health shall comply with all applicable requirements of the Emergency Medical Treatment and Labor Act (EMTALA), including the provision of medical screening examinations, stabilizing treatment, and referring or transferring a patient to another facility when appropriate. St. Croix Health shall provide all emergency services in accordance with CMS conditions of participation.

SEPARATE BILLING & COLLECTIONS POLICY

The actions that St. Croix Health may take in the event of nonpayment are described in a separate Billing & Collections Policy. A free copy of the Hospital's Billing & Collections Policy can be viewed and downloaded on our website at https://www.saintcroixhealth.org/patients-visitors/insurance-billing/financial-assistance/

Appendix A Financial Assistance Table

Appendix B List of Providers covered in Financial Assistance Policy

Attachments

Appendix A: Financial Assistance Table (2023)

Appendix B List of Providers Covered in Financial Assistance.docx

Approval Signatures

Step Description	Approver	Date
Policy Owner	Nicky Gehrman: Director - Revenue Cycle	11/2023