

Sliding Fee Scale Agreement

Purpose: To ensure that quality health care is available for qualifying families, Healthy Connections, Inc. (HCI) has established a system for discounting medical, behavioral health, radiology, lab, and dental care for eligible families. In order to serve the greatest number of families in need, there are clear income for eligibility for the sliding fee schedule.

The Sliding Fee Discount policy is a <u>privilege</u> provided to our clients. Federal law requires that we maintain current and accurate documentation to verify your eligibility. The final determination of eligibility rests solely within Healthy Connections, Inc. If you are not satisfied with your case's determination, you may file an appeal.

PRIVILEGES

- Discounted medical, behavioral health, radiology, lab, and dental care is based on your household's gross income and the number of persons living in a domicile to help uninsured and underinsured patients. The guidelines are established by the Healthy Connections, Inc. Board of Directors annually.
- You may have your discount category recalculated at any time if your household gross income changes significantly or if there is any change to household size.
- If you believe your discount category was incorrectly determined, you may schedule an appointment with the Chief Financial Officer or Chief Executive Officer for a case review.
- If you elect to use our contract pharmacy, you could receive a discount from normal commercial pricing through the 340-B program. Prescription costs are not covered under the Sliding Fee Scale.

RESPONSIBILITIES

- After initial qualification for sliding fee discounts, you must requalify every 12 months by presenting proof of income and verification of household size to the Financial Counselor in the clinic you use.
- If your household's gross income changes by 10% or more during any twelve-month qualification period, you must bring new proof of income and verify the household size to have your discount category recalculated.
- You must keep your account current according to the terms of your payment arrangement.
- It is YOUR responsibility to keep your sliding fee discount program status current. Healthy Connections, Inc. is not authorized to grant exceptions. Services provided while your discount status is not current must be charged at full price.
- HCl cannot backdate qualifications.

DEFINITIONS

Household -Defined to mimic the state and federal household definition for healthcare programs, household refers to all persons related by birth, marriage, or adoption who reside together, dependents, and others in the same tax household. Unrelated individuals who are not dependents living at the same address are considered separate households. The Financial Counselor with follow guidelines outlined within HCI's Sliding Scale Operations Procedure Manual.

Gross Household Income- The modified adjusted gross income (MAGI) as defined by the IRS and used by the state and federal agencies' healthcare programs. Income refers to all cash receipts before taxes with certain adjustments. Income does not include non-cash benefits such as SNAP, school lunch programs, clothing vouchers, or food/rent in lieu of wages. For most patients eligible for sliding fee discounts, income calculation is simple. A full definition of MAGI is available from the IRS.

Dental Discounts- Preapproved full-price charges may be reduced to the current basic office fee depending upon the patient's sliding fee category. See HCl's sliding fee discount scale.

Medical & Behavior Health Discounts- Full-price charges may be reduced to the current basic office fee depending on the patient's sliding fee discount category. See HCl's sliding fee discount scale.

Lab Discounts- Full price charges may be reduced depending on the patient's sliding fee discount category and depending on the day lab work is completed. See HCl's sliding fee discount scale.

X-Ray & Ultrasound Discounts- Full price charges may be reduced depending on the patient's sliding fee discount category. See HCl's sliding fee discount scale.

No Income Statements- An individual or household with "zero income" must sign a "No Income Statement." This is a legally binding document in which false statements constitute fraud. Signing a "No Income Statement" gives HCI permission to access the Internal Revenue Service for the latest federal income tax return.

Proof of Income- This must be current information that includes, but is not limited to, personal tax return or W-2, pay stubs, signed letter from employer, unemployment checks, awards letter, bank statement (for Social Security benefits only.) Self-employed patients are required to provide tax returns, and bank statements are not required or allowed. Where proof of before-tax income is not available, income before taxes can be estimated from proof of net income. Verbal estimates are NOT acceptable.

Patients with third-party coverage - The charge for each sliding fee pay class is the maximum amount an eligible patient in that pay class is required to pay for a specific service, regardless of insurance status. If an insured patient qualifies for the sliding fee discount schedule, the patient will be placed on the sliding fee discount schedule and charged the lesser amount due to the sliding fee discount schedule or the co-pay, deductible etc. HCl does and cannot require individuals to enroll in public or private insurance, and this is not a factor when determining eligibility. However, it is the policy of HCl to educate patients based on their eligibility for public or private insurance for which they might qualify.

ELIGIBILITY AGREEMENT Low and moderate-income households Schedule if:	are eligible for the HCI Sliding Fee Discount
defined by the federal income guideline	s less than 200% of the federal poverty level as es and household size. If your income is 200% of the erstand you do not qualify for this sliding fee discount
	on file updated income verification. Clients are every 12 months. HCl is required to charge full rates
Your account is paid or in currel arrangement.	nt standing according to the terms of your payment
affirmation that you have provided accu Counselor. If you do not fully disclose a are immediately subject to legal procee denying another patient's need for vital	t, you may be terminated as a Healthy Connections,
Signature	 Date