

Policy Name:	Sliding Scale Policy	
Policy Manual:	Financial Counseling Department	Page: 1 of: 2
Policy Scope:	Organization Wide	Original Effective Date: 8/1/1994
Process Owner Title:	Manager of Financial Counseling Department	Version/Last Revision Date: 6/1/2010
References/ Related documents:		

**POLICY**

It is the policy of the Nor-Lea Clinics to offer a sliding scale fee discount. The sliding scale fee is available to anyone whether they have private insurance, Medicare, or are uninsured.

**PURPOSE**

The sliding scale discount is based on the total family income and the number of qualified individuals in the household. All individuals living under one roof are not necessarily counted as members of the household. A household member is defined as an eligible dependent utilizing IRS standard.

A completed application and proof of income determine eligibility. Upon acceptance the sliding scale fee adjustment will be applied to the patients account. Patients are qualified for Sliding Scale Fee Program for a period of twelve months.

**PROCEDURE**

Patient must complete application and provide proof of income. Income shall include most current filed Federal Tax Return with copies of W-2 forms. If applicant does not file Federal Tax Returns proof of income will include the last four weeks of check stubs, or letter of financial support. Applicants stating there is no Federal Tax Return will be required to complete verification of non-filing. If proof of income is not available a statement from the employer giving the gross income for the last four weeks will be accepted.

Sliding Scale percentage is based on household gross income and calculated based on Federal Poverty Guidelines pertaining to household members.

**DETERMINATION**

Upon determining the sliding scale discount, the applicant will be issued a document indicating the qualified percentage as well as qualified family members and the expiration date. This document is to be presented at each household member's appointment.

When there is primary insurance, sliding scale percentages apply to the co-pay or the deductible as applicable. (To any amount the patient is responsible for).

Policy Name:	Sliding Scale Policy	
Policy Manual:	Financial Counseling Department	Page: 2 of: 2
Policy Scope:	Organization Wide	Original Effective Date: 8/1/1994
Process Owner Title:	Manager of Financial Counseling Department	Version/Last Revision Date: 6/1/2010
References/ Related documents:		

**Sliding scale fee discounts apply only to charges incurred at any of the Rural Health Clinics.**

Once qualified for Sliding Scale Fee Program the applicant is qualified for twelve months, but if the applicant feels their income has changed and may benefit from this change they can reapply at any time. Patients may apply as many times as they wish. Sliding Scale discounts will not be applied if the sliding scale applications are not updated after the expiration date. Patients will be asked to pay the balance due after the sliding scale discount has been applied at the time of service. No one will be denied treatment if payment cannot be made.