

Section: Administrative	Behavioral Health Network	Original Date: 4/1/2010
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IV.T	Policy: Sliding Fee Policy	

## I. PURPOSE OF THE POLICY

To provide financial relief to persons who require quality mental health and substance use services when they demonstrate an inability to pay. To ensure that due diligence is performed by BHN for all persons seeking financial assistance. To ensure that said policy is applied fairly and uniformly.

## II. POLICY

It is the policy of BHN to perform due diligence at the time of intake for all persons seeking services when they present as uninsured or indigent. The due diligence process will begin at the time of intake and include periodic review of the individual's insurance eligibility and/or the person's ability to pay.

## III. DEFINITIONS

**Uninsured** – any individual who does not have a contract with an insurer to cover health care costs.

**Indigent** – a condition of having insufficient income to pay for adequate medical care without depriving oneself or one's dependents of food, clothing, shelter, or other living essentials.

## IV. PROCEDURES

**A.** Determining a prospective person served's eligibility through evaluation of Financial Information. Persons who decline to offer this information are ineligible for a discount.

1. A BHN representative will verify the following required documentation to support the due diligence process. Documentation shall include, but not be limited to, the following:
  - a. copies of insurance cards and insurance information
  - b. proof of income:
    - i. Filed current federal income tax return (Form 1040 or Form 1020) or W2; if not available,
    - ii. provide last two earnings statements (pay stubs)
    - iii. Public Assistance check stub/copy
    - iv. Social Security check stub or letter of award
    - v. Certification Letter from Medical Assistance or Department of Social Services
  - c. EVs system eligibility checks
  - d. collection of family size information
  - e. proof of address:

- i. Current MA learner's permit, MA license, or MA ID card
- ii. W-2 Form from current or previous year that displays residential address
- iii. A utility bill (gas, electric, wired telephone, wired cable, or heating oil delivery bill) (no more than 60 days old) that contains the applicant's name and residential address
- iv. Medicaid correspondence (dated within six months of application)
- v. Cell phone, credit card, doctor, or hospital bill issued within the last 30 days
- vi. First-class mail from any federal or state agency that displays residential address
- vii. Form 1551
- viii. Form 194

**B.** Information shall be gathered from the person served to assess the need for a sliding fee. The guideline for determination of a sliding fee shall be based on the most recent Federal Poverty Income Guidelines. See most recent sliding fee scale (Attachment A). The sliding fee process shall include:

1. Household Income Worksheet (Attachment B) used to test the person served's financial status and ability to pay;
2. Sliding Fee Contract (Attachment B) signed by the person served;
3. BHN Sliding Fee Financial Agreement (Attachment C) signed by the person served.

**C.** Sliding fees shall be collected from persons served at the time of service. Collections of cash, check, money orders or credit cards will be accepted by BHN. Monthly bills will be generated to clients with unpaid sliding fees.

**D.** The following steps will be taken to update the person served's ability to pay for services and eligibility. Those steps include, but are not limited to:

1. EVs checks through the EVs report prior to each scheduled service.
2. A reassessment of each person served's financial status every 90 days, in conjunction with the review of the individual treatment plan, or sooner if evidence of changes in financial or income status is known.
3. Verification of residency is documented in person served file, as state residency is a requirement for any funds reimbursement by MA DPH/BSAS.