***[HOSPITAL NAME]***

**ADMINISTRATIVE POLICY**

CATEGORY: Finance **CODE: B-16**

SUBJECT: Provisions for Charitable Patient Care **EFFECTIVE:**

**COORDINATOR: Business Manager**

Consistent with its mission and values, *[Hospital Name]* is committed to providing the highest quality health care services to all members of the community. The Hospital has a limited amount of funds to support individuals who do not have the resources to cover their health care costs and the Hospital is committed to use these funds for the extremely needy patients to ensure that they receive basic health care services. The purpose of this policy is to outline the criteria used to determine if a patient is eligible for charity care.

A separate expense account should be maintained in the hospital’s general ledger that records care provided for charity purposes. Additionally a cash fund should be maintained on the balance sheet to receive donations or allocations for charity care that will be used when charity care is given.

Eligibility:

A potential patient might be eligible for charity care if their or their immediate family’s validated financial position will not allow them or their family to fund their health care services or they are not covered under any health care insurance or other scheme.

The following services are not eligible for charitable care funding:

* 1. Elective or cosmetic procedures.
  2. Services required as a result from a criminal act while in the custody of any law enforcement
  3. Private room differences
  4. Physician professional fees
  5. All services related to self-inflicted injures
  6. Other services as amended from time to time

Charity Care Committee:

The committee will include the Business Manager, the Matron and the Chief Medical Officer. The committee will meet on an “as needed” basis

The purpose of this committee is the following:

* Process requests for charity care from patients and their families.
* Review the charity funds available and the related policies and procedures periodically to ensure they are in line with the Administrative plans.
* Provide reports to the Administrative Committee of the activity of the charity fund as well as any changes to the procedure of providing care.

APPROVED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***[HOSPITAL NAME]***

**ADMINISTRATIVE PROCEDURE**

CATEGORY: Finance **CODE: B-16.1**

SUBJECT: Charitable Care Procedure **EFFECTIVE:**

**COORDINATOR: Business Manager**

The provision of care based on charitable need should be in accordance with policy B-16.

|  |  |
| --- | --- |
| **Initiator of Action** | **Action** |
| Patient or family members | Complete a *[Hospital Name]* Financial Assistance Application form and provide supporting documentation. A caregiver in the hospital can assist the patient or family to complete the necessary form. |
| Business Manager & Charity Care Committee | The completed form will be submitted the Business Manager who will convene a Charity Care Committee to determine if the request will be approved. The request will not be approved unless there is cash or provision available to cover the cost of the charity care. |
| Business Manager | The decision of the committee will be relayed to the requesting patient and if disapproved the reason for disapproval. Such reason could be funds are not available, the requested service is not eligible for charity care, the documents submitted do not support the request, etc. |
| Senior Accountant | If the request is approved the eligibility form attached to the patient bill will be processed by accounting with the cost charged to the applicable charity expense account and the cash coming from the charity fund. |