

Policies & Procedures

FEE POLICY

Section: Finance

Pages: 2

Subject: Fee Policy

Effective Date: 05/2010

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PURPOSE

To charge for services based on verified ability to pay.

POLICY

Eligible patients will be assessed fees based on the Davis Behavioral Health Rate Schedule and/or Discounted Fee Schedule. Eligible patients are those not covered by Medicare, Medicaid, a contracting insurance company, or a special contract.

PROCEDURES

1. Fee Setting & Collecting Procedures:

- a. All client fees, including drug court clients, will be based on the usual and customary rates established by our local authority or a negotiated contracted cost of services.
- b. Client's fees will not exceed the average cost of delivering the service.
- c. All fees assessed to clients, including upfront administrative fees, shall be reasonable as determined by the local authority
- d. Individuals who indicate they are unable to pay for treatment or co-pays (and don't qualify for other funding sources) must provide proof of monthly income (pay stub or bank statement etc.) to qualify for a Sliding Fee (Individuals who do not provide the required documentation may not be scheduled to receive services). The sliding fee will be based on the most recent Approved Fee Schedule.
- e. DBH will adhere to the administrative rules outlined in Utah Code 523-2-5 regarding client fees. This includes a provision that clients who have received an assessment and require mental health or substance use disorder services shall not be denied services based on the lack of ability to

pay.

2. Non-payment guidelines

Current Clients

- a. Services may not be denied for any SU client who is in treatment.
- b. Clients who indicate that they're no longer able to pay their co-payment, deductible, cash price, or sliding fee will be provided a hardship waiver. Waiver forms must be returned to the Corporate Compliance Officer with requested income and expense documents attached as well as the provider's recommendation. A determination will be made regarding the information provided on the form and communicated to the client. If the client refuses to pay for services and declines to complete the hardship waiver, DBH may postpone further appointments until payment is made. This is a UM decision in consultation with treatment providers.
- c. A client being rude does not mean they shouldn't receive services. Sometimes symptoms of illness manifest as anger and irritability. Staff can forward challenging clients to supervisors.

New Clients

- a. Lack of ability to pay does not exclude someone from services
Clients may be required to pay 50% of previous balances before scheduling.

Note: This does not apply to people on MAT from RC/CRU

- b. Bankruptcy: If a new or current client has declared bankruptcy, they will still be provided with the care that's indicated and begin accruing charges as outlined by their insurance, sliding fee, or cash price.

Note: Collection of payment to the previous balance will be done according to bankruptcy documents. Some orders may remove health care debt while others may not.

- c. Medication Assisted Treatment (MAT):
 - i. Guiding principle: DBH will provide MAT upon discharge until care is established elsewhere.
 - ii. Out of County: Receiving Center staff should schedule follow-up MAT in the county of origin for Medicaid CAP, uninsured, and high deductible health plans. However, clients may be seen at DBH for MAT until the warm handoff is completed. Staff must notify intake of this plan.

Note: Clients may not receive other services. Only MAT

Note: If the county of origin won't accept, notify the CEO

