

# Shodair Children's Hospital

## Finance and Business Office Policy Manual

### **TITLE: Financial Assistance Policy**

**AREAS AFFECTED:** All Shodair locations and departments

### **PURPOSE:**

Shodair Children's Hospital is committed to providing medically necessary care to all patients, regardless of their ability to pay. The Charity Care Program a/k/a the ShoCare Program offers free or discounted care to eligible patients who are uninsured, underinsured, or facing financial hardship, in alignment with our mission to serve the Montana community and comply with federal and state regulations.

This program is designed to ensure that finances are not a barrier to accessing medically necessary care at Shodair. In addition to quality care, patients can utilize financial counseling where possible solutions are provided for those who cannot pay their outstanding balance. Our Patient Account Representatives work with the patient and/or guarantor to find reasonable payment alternatives.

Shodair offers a significant discount for patients and/or guarantors who are unable to pay for their healthcare services. Shodair will base the ShoCare program solely on a person's eligibility to pay and will not discriminate on the basis of age, gender, race, sexual orientation, creed, religion, disability, or national origin. The Federal Poverty Guidelines, [Poverty Guidelines | ASPE \(hhs.gov\)](https://www.hhs.gov/ASPE), are used in creating and annually updating the income amounts and corresponding discount percentages each patient and/or guarantor qualifies based on their family size and annual income.

### **POLICY:**

The following guidelines are to be followed when administering the ShoCare program.

1. Shodair will notify patients/families of the ShoCare program by:

Financial Assistance Policy

The Financial Assistance Policy will be displayed in waiting/check in areas, listed on Shodair's website, and will be available to all persons upon request.

The ShoCare application will be available on Shodair's website, or patient can receive a hard copy from the Patient Access department or any location that has a reception area.

2. All patients that seek any Shodair services who qualify for the ShoCare program will receive services regardless of ability to pay.
3. Requests for discounted services may be made by patients, family members, social services staff or others who are aware of existing financial hardship. The ShoCare discount program will be offered for all Shodair services. However, elective procedures and medically unnecessary services may not be allowed.
4. The ShoCare Program procedures will be administered by the Chief Financial Officer or his/her designee. Information about the ShoCare program policy and procedure will be provided and assistance offered for completion of the ShoCare application. Confidentiality will be adhered to for all who seek and are provided with charitable services. The procedures are described in a separate document "Charity Care / ShoCare Procedures".
5. All alternative payment resources must be exhausted, including all third-party payment from insurance(s), Federal and State programs, including applying for any coverage for which they may be eligible. Shodair may also help patients and their families to apply for Medicaid through our Patient Accounts Representative.

6. The patient or guarantor must complete the ShoCare application in its entirety. By signing the application, the applicant is authorizing Shodair to access information to confirm income as disclosed on the application. Providing false information on the application will result in all discounts being revoked and the full balance of the account(s) restored and payable immediately.
7. Eligibility will be based on income and family size, and Shodair uses the Census Bureau definitions for both. However, Shodair will also consider any existing medical debt owed to any entity not associated with Shodair.

Family is defined as a group of two people or more (one of whom is head of household), related by birth, marriage, or adoption and residing together. All such people (including related subfamily members) are considered as members of one family.

Income includes earnings, unemployment compensation, workers' compensation, Social Security, Supplemental Security Income, public assistance, Veteran's payments, survivor benefits, pension or retirement income, interest, dividends, rents, royalties, income from estates, trusts, education assistance, alimony, child support, assistance from outside the household and other miscellaneous sources. Non-cash benefits such as food stamps and housing subsidies do not count.
8. ShoCare discounts will be granted to those with income at or below 500% of the Federal Poverty Level (FPL). The discount schedule will be updated during the first quarter of every calendar year with the most recent Federal Poverty Guidelines, [Poverty Guidelines | ASPE \(hhs.gov\)](#).
9. All ShoCare applicants will be notified of discount determination in writing and will include the percentage of approved discount or the reason for denial. If the applicant is approved for less than 100% discount or the application is denied, the applicant needs to establish payment arrangement with Shodair's Billing Office. The ShoCare discount covers outstanding patient balances for six months prior to the application date and any balances incurred within 12 months after the approval date unless the applicant's financial situation changes significantly during that period. The applicant has the option to reapply after the 12 months have expired or anytime there has been a significant change in family size or income.
10. ShoCare applications and all documentation used to determine eligibility decisions will be maintained and preserved in a confidential file in the Chief Financial Officer's office or network hard drive. Billing

office staff will have access to a shared folder on the network that contains each approve application and the ShoCare discounts at each family size and income level.

11. The amount of ShoCare discounts provided to Shodair’s patient population will be reviewed annually by the CFO. Pertinent information comparing amount budgeted and actual charity care provided shall serve as a guideline for future planning.

Any exceptions to this policy must be approved by the CFO.

**Related Policies:**

- Billing and Collections Policy**
- Insurance Copayment Collections Policy**
- Insurance Verification Policy**
- Uninsured Self-Pay Discount Policy**

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