

Subject: <b>Financial Hardship</b>	Page 1 of 1
Department: <b>Agency</b>	
AAAH Standard:	
Approved Date: 8/28/14	Review Date: 7/21/2020

**Purpose:**

To establish a standard procedure of providing discounted services to clients experiencing financial hardship without violating Center for Medicare/Medicaid Services billing guidelines or other provider contractual obligations.

**Policy:**

When clients of AIHFS inform staff of an inability to pay due to a personal financial hardship, AIHFS may (under Health Care Financial Administration guidelines) offer a discounted service after the client has completed a Discounted /Sliding Fee Application and provides proof of income every 6 months or if the client has any change in income. If a client is unable to pay a fee at the time of service, they will need to complete a client payment agreement. The client must fill out a “No Income” Affidavit every 6 months when applicable.

**Procedure:**

**1. Client Request for financial assistance**

- a. The Clinic Office Coordinator will review the client’s registration packet & make a determination on eligibility for Medicaid and/or other resources.
- b. If client is not eligible for other resources, the Clinic Office Coordinator will assist the client in completing a Discounted/Sliding Fee Application. The client will be advised of which sliding fee scale option they are eligible for and the sliding fee information will be documented in RPMS.
  1. If client is unable to pay in full at the time of services, the Clinic Office Coordinator(s) will complete a client payment agreement with the client and ask the client to pay what they can afford at the time of the visit. For example, \$1.00, \$5.00, \$10.00, any level of demonstrated good faith effort by the client to pay towards their balance

**2. Documentation**

- a. Original copy must be scanned in client’s file.
- b. All clients should be given a copy of agreement.

**3. Outstanding Balance**

- a. Clinic Office Coordinator(s) will verify in RPMS at each client visit for balance due and document attempts to collect existing balances.
- b. Clinic Office Coordinator will address any discrepancies with the Biller.

**Related Documents:**

Discounted/Sliding Fee Application  
Client Payment Agreement  
No Income Affidavit