

3. Financial Support Counselors.

- a. The patient will be informed of the amount (65% of total estimated charges) that the patient is required to pay the hospital prior to having a procedure. The patient will be informed that this is only a pre-payment fee and is only a percentage of the total charge.
- b. The patient will be informed that there will be separate charges for physician services, if applicable. The patient will be referred to UTP Customer service with any questions related to the applicable physician fees. The UTP customer service phone number is 419-383-7197.
- c. Financial Counselors will screen self-pay patients for alternative payers, charity, payment plans and HCAPs.

4. Registration.

- a. Registration Staff will request an insurance card from every patient at check-in, to scan for the patient record, or to verify that the current insurance card is on file.
- b. Point of service check in staff will notify the clinic of self-pay patients who do not pay the required facility pre-payment.

5. Application of Policy.

- a. Patients initially seen in the Emergency Department will have a separate policy regarding the use of Financial Counselors.
- b. This policy does not apply for patients being seen for a post-operative visit.
- c. UTMC and UTP will render medical assistance services as medically necessary for Medicaid patients and residents of the state of Ohio without regard to race, creed, color, age, sex, national origin, source(s) of payment, or handicap.
- d. UTP and UTMC will use a sliding fee scale for uninsured/underinsured patients in households with incomes at or below 200% of the current federal poverty level for services in order to determine financial assistance eligibility.
- e. In compliance with Revised Code 5112.17, UTMC will provide, without charge to the individual, basic, medically necessary hospital-level services to residents of the state of Ohio who are not recipients of the medical assistance program or Medicaid and whose income is at or below the federal poverty guideline. This includes providing basic, medically necessary care without charge to recipients of disability financial assistance and recipients of disability medical assistance.

<p>Approved by:</p> <p>/s/ _____ Date _____ Richard P. Swaine, CPA Chief Executive Officer, UTMC</p> <p>/s/ _____ Date _____ Lance Dworkin, M.D. President, UTP</p> <p><i>Review/Revision Completed By:</i> <i>HAS</i> <i>Office of Legal Affairs</i> <i>UTMC Finance</i> <i>University of Toledo Physicians, LLC</i></p>	<p>Review/Revision Date: 9/1/2010 9/1/2013 9/1/2016 9/1/2019 7/1/2020</p>
<p>Policies Superseded by This Policy: 3364-135-049 Financial Clearance for Elective Radiology Procedures 3364-107-115 Financial Clearance for Laboratory Testing 9/1/2016: Combined 3364-100-60-12 and 60-13</p>	<p>Next Review Date: 7/1/2023</p>