

Parkland Self-Pay Charity Discount Program	009-006	Published: 01/08/2024 Revised 6/1/2025
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PURPOSE:

Parkland Health (Parkland) is committed to providing charity care to persons who have healthcare needs and are uninsured, underinsured, ineligible for a government program, or otherwise unable to pay. Consistent with its mission, Parkland strives to ensure that the financial capacity of people who need health care services does not prevent them from seeking or receiving care. Parkland will provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility for financial assistance, insurance coverage or for government assistance.

SCOPE:

All Parkland ("Parkland") Workforce members.

PROCEDURE:

- 1) Accordingly, this written policy:
 - a) Includes eligibility criteria for financial assistance under the Self-Pay Charity Discount Program
 - b) Describes the eligibility process to qualify applicants.
 - c) Describes the basis for calculating discount amounts and assigning patients who are eligible for financial assistance to discount plans under this policy.
 - d) Describes which services are covered and which are not covered under this policy.
 - e) Describes the method by which patients may apply for financial assistance.
- 2) Patients are expected to cooperate with Parkland's procedures for obtaining financial assistance, and to contribute to the cost of their care based on their individual ability to pay. Individuals with the financial capacity to purchase health insurance shall be encouraged to do so as permitted by law and their insurer's/employer's policies.

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- 3) To manage its resources responsibly and to allow Parkland to provide the appropriate level of assistance to the greatest number of persons in need, Parkland establishes the following guidelines for the provision of a self-pay charity discount.
- 4) Eligibility for Self-Pay Charity Discount: The granting of self-pay charity discount shall be based on financial need and shall not consider sex, race, social or immigrant status, national origin, sexual orientation, gender identification or expression, or religious affiliation. Eligibility for self-pay charity discount will be considered for those individuals, who are uninsured, underinsured, or who are enrolled in a traditional Medicaid government health care benefit program and receive non-covered services due to over-utilization of Medicaid benefits. Traditional Medicaid recipients whose services are deemed non-covered by the State Medicaid guidelines shall automatically qualify for Self-Pay Charity Discount care under this Policy and are exempt from application requirements; however, medical necessity and other guidelines still apply. Non-Dallas County patients who qualified for Pregnancy Medicaid or Chip Perinate and those benefits either ended or converted to Texas Healthy Women Medicaid will be eligible for SPCD 8 for 1 year after delivery. No application is necessary. If these post-natal patients become eligible for another funding source, the SPCD will become secondary. Non-Dallas County patients who are self-pay when they deliver and have been screened for Medicaid will be eligible for SPCD 8 for 1 year from delivery. If Non-Dallas County patients chose not to apply for Medicaid or are over income for Medicaid, they will be placed on SPCD 8 or a Package Plan and asked for a down payment. Non-Dallas County SPCD patients who are unable to pay the down payment will be rescheduled.
- 5) Dallas County patients whose plans are out of network with Parkland (non-contracted plans) will be eligible for SPCD 4, if an individual Letter of Agreement is not able to be secured for Inpatient services or if the patient is referred to a specialty or COPC service area. Non-Dallas County residents will be eligible for SPCD 8 and will receive a 60% discount. Patients with any insurance coverage under contract with Parkland are eligible to receive a discount on charges, including deductibles, co- insurance, or co-payment responsibilities only to the extent allowed by the insurance contract. Patients who are currently enrolled in a Parkland Financial Assistance (PFA) program are covered through the PFA program guidelines and not this policy. [Parkland Financial Assistance Policy 009-005](#)
 - a) In the absence of a formal application, Parkland may utilize third-party software to identify a potentially eligible patient's propensity to pay and document this effort in the patient's financial record as evidence of due diligence in making a qualification determination.

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- b) Applicants shall actively participate with Parkland Financial Counselors in identifying and applying for other funding sources. Cooperation includes providing evidence of ineligibility for Medicare, Medicaid, CHIP, CHIP Perinatal, Supplemental Security Income (SSI), County Indigent Healthcare Program or other assistance programs. Parkland may utilize third-party software to identify a potentially eligible patient's Federal Poverty Level (FPL) and their Propensity to Pay and document this effort in the patient's financial record as evidence of due diligence in making a qualification determination.
- 6) **Eligibility Periods:** Enrollment periods for approved SPCD participants shall not exceed twelve calendar months from the date of approval. The enrollment period end date will be the last day of a calendar month.
- 7) **Retroactive Eligibility:** Retroactive eligibility may be available to an applicant who did not apply for Self-Pay Charity Discount Program until after they received care at Parkland, either because they were unaware of financial assistance or because the nature of their illness prevented the filing of a request. Retroactive eligibility is available when there is an unpaid medical bill from Parkland for a service provided within (3) three full months immediately before the month an identifiable request is received, providing the individual meets all the eligibility criteria. The applicant can be ineligible for the month of application and prospective months and be approved for one or more months of retroactive eligibility.
- 8) **Covered Services Under This Policy:** For purposes of this policy, charity or financial assistance refers to medically necessary healthcare services provided by Parkland at a discount, to qualifying patients.
- 9) In implementing this Policy, Parkland management and facilities shall comply with all other federal, state, and local laws, rules and regulations, including EMTALA that may apply to activities conducted pursuant to this Policy. Emergency Medical Treatment and Active Labor Act (EMTALA) refers to Sections 1866 and 1867 of the Social Security Act, 42 U.S.C. § 1395dd, which obligates hospitals to provide medical screening, treatment and transfer of individuals with emergency medical conditions or women in labor. It is also referred to as the antidumping statute.
- 10) The following preventive services will be provided at no cost to the patient:
 - Immunizations for flu.
 - Pap Screening Test.
 - MA Mammogram Screening Bilateral Digital with CAD and Tomosynthesis

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CT Chest Lung Cancer Screen w/o IV Contrast.

Occult Blood FIT.

HPV (Gardasil) – Cervical Cancer Prevention.

Covid – 19 testing and vaccine.

11) Method by Which Patients May Apply for Charity Care:

- a) Patients shall apply for charity and make a down payment prior to rendering of non-emergent medically necessary services. Exceptions will be granted based on review by Parkland's Physician Advisor and/or Utilization Review department. All eligible services are automatically granted the lowest discount level (Plans 4 or 8). Higher discount levels require an application or soft credit scoring determination process.
- b) Include the use of publicly available data sources that provide information on a patient's or a patient's guarantor's ability to pay (such as credit scoring).
- c) Include reasonable efforts by Parkland and the patient to explore appropriate alternative sources of payment and coverage from public and private payment programs and to assist patients to apply for such programs (Emergency Medicaid, SSI Medicaid, COBRA)
- d) Non-Dallas County patients enrolled in Pregnancy Medicaid or Chip Perinate will not need to apply for SPCD. They will be presumed eligible for SPCD 8 based on the screening and enrollment done by the Health & Human Services Commission (HHSC). Eligibility will be effective the day after delivery for up to one year. Non-Dallas County patients who are self-pay when they deliver and have been screened for Medicaid will be eligible for SPCD 8 for 1 year from delivery. If Non-Dallas County patients chose not to apply for Medicaid or are over income for Medicaid, they will be placed on SPCD 8 or a Package Plan and asked for a down payment.
- e) Non-Dallas County SPCD patients who are unable to pay the down payment at time of service will be rescheduled until they are able to pay.
- f) In the event there is no proprietary information available to support a patient's eligibility for the Self Pay Charity Discount, Patient Financial Services may assign such patients to a charity plan based on best available information and document the basis for this determination in the patient's account notes in EPIC.

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12) The basis for the amounts Parkland will discount its services and the eligibility criteria for qualifying for financial assistance under the Self Pay Charity Discount program are as follows:

Discount Plans and Co-Pays—Table G-1.

- i. Patients must agree, in writing, to make financial contributions at the time of service (Co-Pay) and/or by adhering to a defined payment plan as established by the Patient Financial Services department.
- ii. Patients must pay the accompanying down payment in full prior to scheduling of any appointment and commencement of treatment plan. If patient has paid their down payment in full and has a treatment plan of care established, this will allow the patient to access prescriptions from the pharmacy without any additional payments.
- iii. Parkland may offer some free screenings to all county residents in an appropriate clinical situation (e.g., mammograms for women greater than 40 years old).
- iv. Follow up diagnostic studies will be discounted according to the appropriate PFA or SPCD schedule.
- v. The Self Pay Charity Discount Program has four plans which are defined below. Assignment to a Plan is based on a patient's income and residency.

1. Dallas County:

- a. SPCD 3 A Dallas County eligible patient whose family income is between 251% and 400% of the FPL is eligible to receive a 75% discount off gross charges and is responsible for down payment amounts at the time of service. (Down payment applies—See Table G-1.).
- b. SPCD 4 No Pharmacy Discount—A Dallas County eligible patient whose family income is equal or greater than 401% of FPL is eligible to receive a 75% discount off gross hospital, hospital outpatient and clinic visit charges and is responsible for down payment amounts at the time of service. (Down payment applies—See Table G-1.).

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2. Non-Dallas County

- a. SPCD 8 No Pharmacy Discount—A Non-Dallas County eligible patient is eligible to receive a 60% discount off gross hospital, hospital outpatient and clinic visit charges and is responsible for down payment amounts at the time of service. (Down payment applies—See Table G-1).
- b. SPCD 9 Out of Country, No Pharmacy Discount—A Non-Dallas County patient who resides outside of the US, is eligible to receive a 60% discount off gross hospital, hospital outpatient and clinic visit charges and is responsible for down payment amounts at the time of service. (Down payment applies—See Table G-1).

3. Patients who have received minor or major surgery at Parkland will receive 10 or 90 days of follow up post-op care based on CMS guidelines. The patient will be approved to be seen within the same Specialty following a procedure. If multiple procedures are done from one injury, all follow ups for that Specialty will have a 10 or 90 follow up. Down payments for these visit types will be requested but not required during the 10 or 90 day follow up period. After the 10 or 90 day follow up period, patients will be required to make the down payment in full for all ongoing follow up care.

13) Patient Financial Services will have the flexibility on a case-by-case basis to work with patients and families to assist them with meeting financial obligations. Parkland may offer a non-interest financing option or payment plan for those patients requiring assistance with meeting their out-of-pocket amounts due at time for service for non-emergent services.

Self-Pay Charity Discount Plan Structure--Table G-1

SPCD DALLAS COUNTY RESIDENTS ONLY		IP Services/ER	Oncology	Standard	Radiology	New/Established Patient COPC/OPC			Recurring Svcs	Dental	Long Term
Plan Code	Plan Name	Discount %	Surg/Chemo/ Radiation	Surgery	MRI/CT/IR	COPC/Lab/Basic Radiology	Specialty Care	Today Clinic/ Wound Care	per visit	per visit	GI and IR
			Down Payment	Down Payment	Down Payment	Down Payment	Down Payment	Down Payment	Down Payment	Down Payment	Annual Down Payment
SPCD 3	SPCD Dallas County 251%-400%	75%	** \$1,500	\$750	\$450	\$50	\$100	\$50	\$10	\$50	\$400
SPCD 4	SPCD Dallas County ≥401%	75%	** \$2,000	\$1,000	\$600	\$50	\$100	\$50	\$10	\$50	\$500

SPCD NON-DALLAS COUNTY RESIDENTS ONLY		IP Services/ER	Oncology	Standard	Radiology	New/Established Patient COPC/OPC			Recurring Svcs	Dental	Long Term
Plan Code	Plan Name	Discount %	Surg/Chemo/ Radiation	Surgery	MRI/CT/IR	COPC/Lab/Basic Radiology	Specialty Care	Today Clinic/ Wound Care	per visit	per visit	GI and IR
			Down Payment	Down Payment	Down Payment	Down Payment	Down Payment	Down Payment	Down Payment	Down Payment	Annual Down Payment
SPCD 8	Non-Dallas County	60%	** \$4,000	\$4,000	\$1,200	\$100	\$200	\$100	\$20	\$50	\$2,000
SPCD 9	Out of Country	60%	** \$15,000	\$15,000	\$1,200	\$100	\$200	\$100	\$20	\$50	\$4,000
	PFA Parkland Financial Assistance		IP Services						Level-I Services	Level-II Services	Recurring Svcs
Plan Code	Plan Name	Discount %	Co-Pay			Day Surgery	ER/UCEC/OBS	Office/Today Clinic Visit	Routine Radiology, Lab, EKG, Mammogram/ Son/Diag. Breast Sono	OP Surgery, IR, Non Breast Sono, CT, MRI, NUC, CV	Per-Visit Co-Pay
PFA 0	PFA Level 0 0%-138%	N/A	\$0			\$0	\$0	\$0	\$0	\$0	\$0
PFA 1	PFA Level 1 139%-150%	N/A	\$100			\$75	\$25	\$5	\$5	\$75	\$5
PFA 2	PFA Level 2 151%-200%	N/A	\$200			\$150	\$50	\$10	\$10	\$150	\$10
PFA 3	PFA Level 3 201%-250%	N/A	\$400			\$300	\$100	\$20	\$20	\$300	\$20

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Dallas County patients who did not apply for Grants or Medicaid or are Medicare Part B only recipients or dropped their coverage will be eligible for SPCD 4.

Non-Dallas County patients who are uninsured will be eligible for SPCD 8.

- 14) Communication of the Self Pay Charity Discount Program to Patients and Within the Community: Notification regarding Parkland Self Pay Charity Discount shall be made available on Parkland's website and disseminated by various other means which may include publishing notices on patient statements, posting notices in emergency department: including in the Conditions of Admission form at Population Health Patient Centers, admitting and registration areas, and patient financial services offices; and posting at other public places as Parkland may elect. Parkland shall also publish a copy of this charity care policy in brochures available at inpatient access sites and at other places within the community served by the hospital. Parkland will not widely publicize before care is given that underinsured persons may be eligible for discounted care to avoid even the appearance of seeking to steer them to Parkland for care. Such notices and summary information shall be provided in the primary languages spoken by the population served by Parkland. Referral of patients for eligible discounted care may be made by any member of the Parkland staff or medical staff, including physicians, nurses, financial counselors, social workers, case managers, chaplains, and religious sponsors. A request for charity may be made by the patient, a family member, or other advocate of the patient, subject to applicable privacy laws.

EQUIPMENT:

N/A

DEFINITIONS:

Charity Care: Healthcare services that have been or will be provided but are not expected to result in substantial cash in-flows. Charity care results from a provider's policy to provide healthcare services free or at a discount to individuals who meet the established criteria.

Community Oriented Primary Care (COPC): Primary care clinics owned by Parkland and primarily staffed with Parkland Providers.

Emergency medical condition: Defined within the meaning of section 1867 of the Social

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Security Act (42 U.S.C 1295dd). Family: Using the Census Bureau definition, a group of two or more people who reside together and who are related by birth, marriage, or adoption. According to Internal Revenue Service rules, if the patient claims someone as a dependent on their income tax return, they may be considered a dependent for purposes of the provision of financial assistance.

Family Income: Family Income is determined using the Census Bureau definition, which uses the following income when computing federal poverty guidelines:

- ✓ Includes earnings, unemployment compensation, workers' compensation, Social Security, Supplemental Security Income, public assistance, veterans' payments, survivors' benefits, pension or retirement income, interest, dividends, rents, royalties, income from estates, trusts, educational assistance, alimony, child support, assistance from outside the household and other miscellaneous sources;
- ✓ Noncash benefits, (such as food stamps and housing subsidies) do not count.
- ✓ Determine on a before-tax basis.
- ✓ Excludes capital gains or losses; and
- ✓ If a person lives with a family, include the income of all family members (non-relatives, such as housemates, do not count) and include all family members in the family unit size.

Federal Poverty Level: A person's family unit resources or property and income is evaluated, and their Federal Poverty Income Level (FPIL) is determined for the size of the family unit, rounded to the nearest dollar, and in accordance with all regulations and qualifications set forth in this policy.

Gross Charges: The total charges at the organization's full established rates for the provision of patient care services before deductions from revenue are applied.

Medically Necessary: As defined by CMS (Services or supplies that are proper and needed for the diagnosis or treatment of the medical condition; are provided for the diagnosis, direct care, and treatment of the medical condition; meet the standards of good medical practice in the local area; and aren't mainly for the convenience of the treating physician).

Non-Emergency Services: Healthcare services which are considered elective, routine, or preventive in nature. Services which are typically provided in a physician office, clinic or other outpatient area of a hospital outside the emergency or urgent care department and not intended to treat an immediate life-threatening condition.

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OPC: Outpatient Clinics that provide specialty care owned by Parkland and staffed primarily by UTSW Providers. Professional charges (UTSW) incurred in OPC locations are not covered by Parkland's Self-Pay Charity Discount. Charity care provided by UTSW is provided pursuant to a separate agreement between UTSW and Parkland.

Underinsured: The patient has some level of insurance or third-party assistance but still has out-of-pocket expenses that exceed his/her financial abilities.

Uninsured: The patient has no level of insurance or third-party assistance to assist with meeting his/her payment obligations.

Workforce member: An Officer, board member, employee, volunteer, member of the medical staff, contractor, vendor, trainee or other person whose conduct, in the performance of work for Parkland, is under the direct control of Parkland, whether or not he or she is paid by Parkland.

REFERENCES:

N/A