

CORPORATE POLICY

SUBJECT: Hardship Fee Reduction for Medical, Dental, and Behavioral Health Services	CATEGORY: Finance ORIGINAL DATE: January 1, 1998 REVIEWED DATE: December 29, 2022 REVISION DATE: December 29, 2022 May 21, 2025.
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I. POLICY:

Lake County Health Department and Community Health Center (LCHD/CHC) will not deny anyone access to care due to inability to pay and offers a sliding fee adjustment to the amount a client/patient is billed for services. It is intended to reflect what individuals should reasonably spend on LCHD/CHC services. Predetermined amounts do not consider all financial circumstances clients face and for this reason the LCHD/CHC maintains an option of adjusting, removing, or maintaining fees for individuals. The LCHD/CHC offers clients a payment plan option prior to considering any fee adjustment, but any clients with extraordinary circumstances can request and complete the Financial Hardship Application form for consideration of a fee reduction.

II. SCOPE:

All LCHD/CHC Patient Accounts, Central Billing, and Finance Office staff and management.

III. PROCEDURE:

- A. This [procedure](#) establishes the protocol for client fee review and/or reduction [due to financial hardship](#). Clients may complete the Financial Hardship Application form explaining the extraordinary expenses ~~they facesuch as experiencing loss due to fire or ; flood, being a victim of domestic violence, human caused disasters or other~~ [extenuating circumstances that result in financial hardship not clearly reflected by that may place them in a different situation than others of similar](#) income and family size. A client may initiate this request at any time during treatment or visit.
- B. Client initiates the request for fee reduction by completing the Financial Hardship Application form. Patient Accounts staff must then verify the information provided on that form before completing the recommended Hardship Waiver and entering comments. Those comments should address the relative merit of the request.
- C. After Patient Accounts staff determines the Financial Hardship Application form meets the requirements for an adjustment, it is sent to the Finance Department where it must receive approval from [the Patient Accounting Manager for backdated slides and](#) either the Director of Finance or the Associate [Finance](#) Director [for other adjustments](#). Upon their approval, the document is sent to the Patient Accounts Supervisor where the appropriate adjustments are made on the client's account.
- D. If there is a past due balance on the account, the client is requested to sign up for a budget payment plan.
- E. In cases of public health outbreaks or to abide by public health grant or CDC direction, the Director of Prevention or the Executive Director can approve waiving of fees to protect the health of the public.
- F. The [Finance and Billing Manager Associate Finance Director](#) has the authority to approve hardship discounts up to 10% of the outstanding client account balances.

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- G. Hardship discounts greater than 10% but less than 25% must be approved by the Director of Finance. Discounts of 25% or more must be approved by the Executive Director via the Director of Finance.

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IV. REFERENCES:

Billing and Collection for Medical, Dental, and Behavioral Health Services Policy
Charge Corrections, Write Offs, and Encounter Adjustments to the Practice
Management System Policy
HRSA PIN 2014-02

V. AUTHORS/REVIEWERS:

Finance and Business Office Management, Corporate Policy and Procedure Committee,
Executive Team, Executive Committees of the Board of Health and Governing Council.

VI. APPROVALS:

Lake County Health Department and Community Health Center Executive Director

Signature: _____ Date: _____