

Policy: Self-Pay Discount Policy

Division: Corporate Finance

Department: Revenue Cycle

Category: Compliance

Location(s): See below

Original Date: February 1, 2021

**Review/Revision
Effective Date:**

Owner: Revenue Cycle

Previous Review/Revision Dates:

Policy Statement:

As part of the Sentara Healthcare (“Sentara”) mission to improve health every day, Hospital Facilities are committed to providing Emergency Services and other Medically Necessary Services to all patients within their respective communities, regardless of a patient’s ability to pay for such services.

Purpose:

This Self-Pay Discount Policy (“Policy”) establishes the policy to be followed by each Hospital Facility in determining a patient’s eligibility for the Self-Pay Discount and the amounts charged to patients eligible for the Self-Pay Discount. This Policy may also be referred to in brochures and other hospital literature and print as the hospital’s Uninsured Patient Discount Program. Sentara understands that health care expenses are often unexpected and paying for services can be overwhelming for patients without insurance. This Policy and the application of a Self-Pay Discount to Covered Services is one way that Sentara is able to assist Uninsured Patients.

Definitions:

Covered Services - Emergency Services and other Medically Necessary Services provided by a Hospital Facility.

Emergency Services – Care or treatment provided by a Hospital Facility for an “emergency medical condition,” as such term is defined in EMTALA.

EMTALA – Emergency Medical Treatment and Active Labor Act (42 U.S.C. § 1395dd; 42 C.F.R. § 489.24).

Federal Poverty Guidelines - Federal poverty guidelines as published annually by the U.S. Department of Health and Human Services. See <http://aspe.hhs.gov/poverty/index.cfm> for the current guidelines

Financial Assistance – A reduction in the amount of Hospital Facility Gross Charges for those patients who are eligible for financial relief under the Financial Assistance Policy. May also be referred to and is synonymous with the terms ‘Charity’, ‘Charity Care’, or ‘Charity Assistance’ for financial reporting, regulatory reporting, and compliance purposes.

Gross Charges – A Hospital Facility’s full, established price for medical care services that the Hospital Facility consistently and uniformly charges patients before applying any contractual allowances, discounts, or deductions.

Hospital Facility– A Sentara-operated hospital facility requiring hospital licensure under Title 32.1, Chapter 5 of the Code of Virginia. This Policy applies to the following hospital facilities:

- Sentara Albemarle Medical Center
- Sentara Careplex Hospital (including Port Warwick ASC)
- Sentara Halifax Regional Hospital
- Sentara Leigh Hospital
- Sentara Norfolk General Hospital
- Sentara Northern Virginia Medical Center
- Sentara Martha Jefferson Hospital
- Sentara Obici Hospital
- Sentara RMH Medical Center
- Sentara Princess Anne Hospital
- Sentara Virginia Beach General Hospital
- Sentara Williamsburg Regional Medical Center

Medically Necessary Services– Reasonable and necessary services required for the diagnosis or treatment of an illness, injury, or pregnancy-related condition that are performed in accordance with recognized standards of care at the time of service and that are not primarily for the convenience of the patient or the patient’s physician or other health care provider.



Self-Pay Discount - A fixed discount percentage applied to Hospital Gross Charges on Covered Services of Uninsured Patients.

Third-Party Liability Claims – Any claim a patient may have against another individual, insurer, or entity responsible for covering the patient’s cost of medical services.

Uninsured Patients – Individuals who do not have governmental, commercial, managed care, or private health insurance or whose insurance benefits have been exhausted.

Covered Services:

Only Covered Services provided by a Hospital Facility or its Substantially-Related Entity are considered eligible patient care under this Policy.

Eligibility Criteria and Determination of Self-Pay Discount Amount:

Uninsured Patients, regardless of Household Income, are eligible for a 50% Self-Pay Discount on Gross Charges for all hospital Covered Services. The Self-Pay Discount is automatically applied with a Self-Pay Discount transaction code before billing, but if it isn’t applied prior to billing it may be applied manually at any time. If an Uninsured Patient applies for assistance under the hospital’s Financial Assistance Policy and it is determined that they are over income for Financial Assistance purposes they would then be eligible for and receive the 50% reduction of Gross Charges on all Covered Services. Uninsured Patients with Third-Party Liability Claims are not necessarily entitled to receive the Self-Pay Discount as another entity or payer source is covering the patient’s cost of medical services.

Methods for Applying for or Obtaining a Self-Pay Discount:

While in the majority of all cases the Self-Pay Discount is automatically applied to accounts with Covered Service an Uninsured Patient can still contact a Financial Assistance Coordinator at 757-233-4600 to have their account reviewed for the Self-Pay Discount and to be screened for hospital Financial Assistance.

Exceptions to this Policy

The Director, Financial Clearance and Collections, Assistant Counsel, Collections, Vice President of Revenue Cycle, Vice President of Corporate Finance, and Chief Financial Officer of Sentara are each granted the authority to provide eligibility and determination exceptions to this Policy on a case-by-case basis as appropriate to an individual patient’s facts and circumstances. In the event that a Public Health Emergency is declared, Sentara Healthcare leaders authorized on a case-by-case basis to make eligibility and determination exceptions to this Policy may temporarily modify the eligibility and determination requirements of all applicants for the duration of the Public Health Emergency.