



45 W. 111th Street
CHICAGO, IL. 60628

POLICY AND PROCEDURE

FIN -178.03

EFFECTIVE: 1/01/2015

REVISED: 01/07/2017

REVISED: 08/06/2018

REVISED: 08/20/2020

REVISED: 09/20/2022

REVIEWED: 01/01/2016

REVIEWED: 03/05/2017

REVIEWED: 06/11/2019

REVIEWED: 12/30/2021

REVIEWED: 03/30/2023

TITLE: **Presumptive eligibility**

Roseland Community Hospital shall establish presumptive eligibility as part of Hospital Financial Assistance Program / application in compliance with the 77IAC - 4500.30 that required an opening statement and more specific information that must be included in the application.

EXPLANATION:

Roseland Community Hospital shall establish presumptive eligibility process as part of Hospital Financial Assistance Program and as part of “No Surprises Act”. CMS 45 CFR 149.140

PROCEDURE:

Section 4500.40 Presumptive Eligibility Criteria

- a) RCH hospital shall develop and implement a Presumptive Eligibility Policy setting forth the presumptive eligibility criteria by which a patient's financial need is determined and used by the hospital to deem a patient eligible for hospital financial assistance without further scrutiny by the hospital. The presumptive eligibility criteria set forth in each hospital's Presumptive Eligibility Policy shall be applied to an uninsured patient as defined in Section 10 of the Act as soon as possible after receipt of health care services from a hospital by the patient and prior to the issuance of any bill for those health care services by the hospital.
- b) Patients shall be deemed presumptively eligible for hospital financial assistance if the patient demonstrates one or more of the following, which shall be included in the presumptive eligibility criteria for those hospitals:

- 1) Homelessness;
 - 2) Deceased with no estate;
 - 3) Mental incapacitation with no one to act on patient's behalf;
 - 4) Medicaid eligibility, but not on date of service or for non-covered service;
 - 5) Enrollment in the following assistance programs for low-income individuals having eligibility criteria at or below 250% of the federal poverty income guidelines:
 - A) Women, Infants and Children Nutrition Program (WIC);
 - B) Supplemental Nutrition Assistance Program (SNAP);
 - C) Illinois Free Lunch and Breakfast Program;
 - D) Low Income Home Energy Assistance Program (LIHEAP);
 - E) Enrollment in an organized community-based program providing access to medical care that assesses and documents limited low-income financial status as a criterion for membership;
 - F) Receipt of grant assistance for medical services.
- c) RCH may include additional presumptive eligibility criteria, provided that the additional criteria are used for or have the effect of expanding a patient's presumptive eligibility for hospital financial assistance, which shall be included in the presumptive eligibility criteria for the particular hospital. These additional criteria may include, but are not limited to:
- 1) Recent personal bankruptcy;
 - 2) Incarceration in a penal institution;
 - 3) Affiliation with a religious order and vow of poverty;
 - 4) Enrollment in the following assistance programs for low-income individuals:
 - A) Temporary Assistance for Needy Families (TANF);
 - B) IHDA's Rental Housing Support Program.

- d) Patients shall be deemed presumptively eligible for hospital financial assistance if the patient demonstrates one or more of the following, which shall be included in the presumptive eligibility criteria for those hospitals:
- 1) Homelessness;
 - 2) Deceased with no estate;
 - 3) Mental incapacitation with no one to act on patient's behalf;
 - 4) Medicaid eligibility, but not on date of service or for non-covered service.
- e) RCH may include additional presumptive eligibility criteria, provided that the additional criteria are used for or have the effect of expanding a patient's presumptive eligibility for hospital financial assistance, which shall be included in the presumptive eligibility criteria for those hospitals, such as:
- 1) Recent personal bankruptcy;
 - 2) Incarceration in a penal institution;
 - 3) Affiliation with a religious order and vow of poverty;
 - 4) Patients who receive grant assistance for medical services;
 - 5) Women, Infants and Children Nutrition Program (WIC);
 - 6) Supplemental Nutrition Assistance Program (SNAP);
 - 7) Illinois Free Lunch and Breakfast Programs;
 - 8) IHDA's Rental Housing Support Program;
 - 9) Low Income Home Energy Assistance Program (LIHEAP);
 - 10) Temporary Assistance for Needy Families (TANF);
 - 11) Enrollment in an organized community-based program providing access to medical care that assesses and documents limited low-income financial status as a criterion for membership.

REFERENCE:

- Amended at 38 Ill. Reg. 20263, effective October 10, 2022)
- Fair Patient Billing Act 210 ILCS 88
- No Surprises Act (ACA 2021)
- Hospital Uninsured Patient Discount Act Nov ,2022.

Robert Vais, C.F.O. 03/30/2023
Chief Financial Officer Date

Tim Egan, C.E.O. 03/30/2023
Chief Executive Officer Date