

# CLINICAL SLIDING FEE SCHEDULE

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# Sliding Fee Schedule Requirement

Offering a Sliding Fee Schedule for Qualifying Patients is a Requirement



HEALTH AND HUMAN  
SERVICES (HHS)



HEALTH RESOURCES  
AND SERVICES  
ADMINISTRATION  
(HRSA)



OTHER PASS-THROUGH  
GRANTS

# HRSA Sliding Fee Program Requirements

*Authority Section 330(k)(3)(G) of the PHS Act; 42 CFR 51c.303(f), 42 CFR 51c.303(g), 42 CFR 51c.303(u), 42 CFR 56.303(f), 42 CFR 56.303(g), and 42 CFR 56.303(u)*

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- **The health center must operate in a manner such that no patient shall be denied service due to an individual's inability to pay.**
- The health center must **prepare a schedule of fees or payments for the provision of its services consistent with locally prevailing rates or charges and designed to cover its reasonable costs of operation and must prepare a corresponding schedule of discounts [sliding fee discount schedule (SFDS)]** to be applied to the payment of such fees or payments, by which discounts are adjusted on the basis of the patient's ability to pay.

# HRSA Sliding Fee Program Requirements

*Authority Section 330(k)(3)(G) of the PHS Act; 42 CFR 51c.303(f), 42 CFR 51c.303(g), 42 CFR 51c.303(u), 42 CFR 56.303(f), 42 CFR 56.303(g), and 42 CFR 56.303(u)*

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- The health center must establish systems for [sliding fee] eligibility determination. [\(SNCHC: FPG, Family Size and Annual Income\)](#)
- The health center's schedule of discounts must provide for:
  - A full discount to individuals and families with annual incomes at or below those set forth in the most recent [Federal Poverty Guidelines \(FPG\)](#) [100% of the FPG], **except that nominal charges for service may be collected from such individuals and families where imposition of such fees is consistent with project goals;** and
  - No discount to individuals and families with annual incomes greater than twice those set forth in such Guidelines [200% of the FPG].

# HRSA Billing & Collection Requirements

*Authority Section 330(k)(3)(E), (F), and (G) of the PHS Act; and 42 CFR 51c.303(e), (f), and (g) and 42 CFR 56.303(e), (f), and (g)*

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- The health center must assure that any fees or payments required by the center for health care services will be reduced or waived in order to assure that no patient will be denied such services due to an individual's inability to pay for such services.
- The health center **must make and continue to make every reasonable effort to secure payment for services from patients**, in accordance with health center fee schedules and the corresponding schedule of discounts
  - Sending of Patient Statements initiated in December 2023
  - Approximately \$17,700 collected from past due balances

# Sliding Fee Program in Action

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- Patients are eligible to be placed on the Sliding Fee Discount Schedule based on their annual income and family size;
- Based on a patient's placement on the schedule, a sliding fee charge is created and billed to the patient at the point of care;
- Patients are asked to make a payment;
- Patient either make a full payment, partial payment or no payment;
- **ALL patients are seen regardless of their ability to pay;**
- Patients with outstanding payment balances are sent a billing statement with a request to pay;
- Any outstanding payment balances after 12 months are written off as bad debt;
- Patients are **NOT** sent to collections to recover outstanding payments.
- Patients receive assistance for the health center's Eligibility Workers to screen for eligibility and assistance with submitting applications to enroll in Medicaid.

# Support to Patients Who Do Not Qualify for the SFDS

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- New recommended discount
- Point of Care Discount of 50% to patients who do not qualify for the SFDS and are charged the full fee and make their payment at the time of their visit.
  - Primary Care and Sexual Health patients with incomes greater than 200% of the FPL
  - Family Planning patients with incomes at or above 251% of the FLP
  - Ryan White patients with incomes at or above 400% of the FLP
- Intent:
  - Remove access barriers for patients who may forgo receiving care based on the communicated full charges.
  - Increase participation among uninsured patients paying for their services.
- Complements the Sliding Fee Discount schedule.

# Sliding Fee Discount Schedule Analysis

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Determine if the Nominal and Sliding Fee charges are comparable with the local prevailing market.

- Comparative analysis of Nominal and Sliding Fee charges among Nevada FQHCs

Assess if the Nominal and Sliding Fee charges present a financial barrier to accessing care.

- Patient surveys
- Participation rate of making payments on Nominal fees among SNCHC patients seen in calendar year 2023 (CY23)



# Market Study of Fees for FQHCs in Nevada

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Seven (7) Health Centers queried in March 2024. They include:

- All for Health, Health for All
- Firstmed Health & Wellness
- First Person Care Clinic
- Hope Christian Health Center
- Nevada Health Centers
- Southern Nevada Community Health Center
- Canyonlands Healthcare

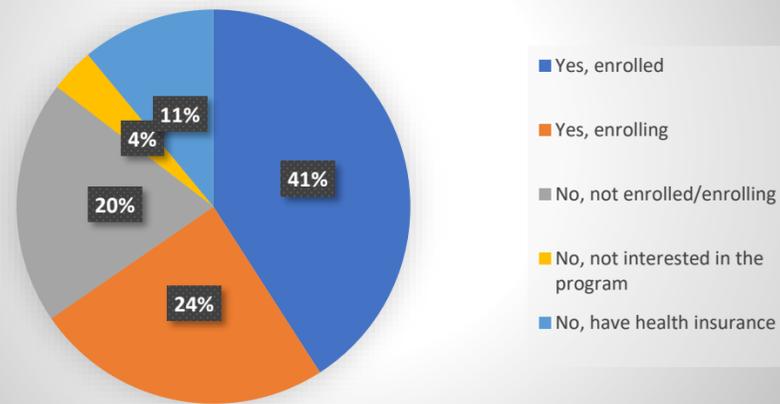
# Market Study of Fees for FQHCs in Nevada

FQHC	*SNCHC	A	B	C	D	E	F
Lowest Slide Scale Fee	\$0/\$20	\$20	\$0	\$35	\$40	\$35	\$0
Highest Slide Scale Fee	\$55	\$100	Must come in to discover rate	\$75	\$70	Must come in to discover rate	\$50
Full Price Fee	\$200	\$200	\$120	\$100	\$200	Ala Carte-billed after visit	Ala Carte-billed after visit

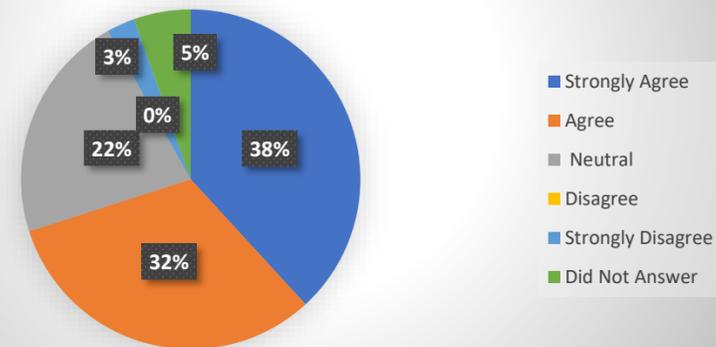
\* Charges include office visit and basic labs

# Sliding Fee Program Survey Results

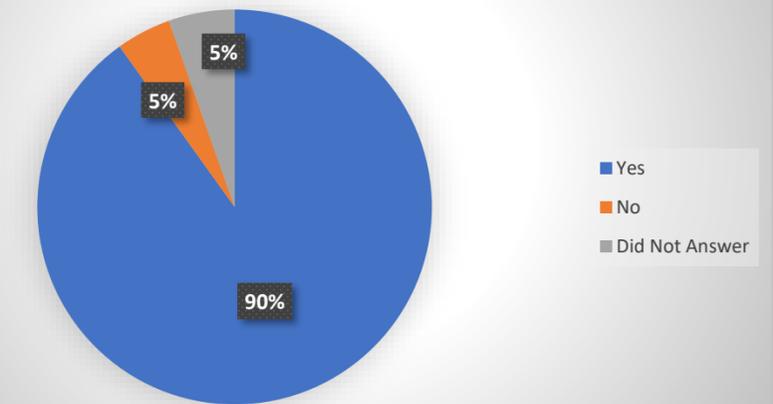
Q1: Are you enrolled or enrolling in the Sliding Fee Discount Program?



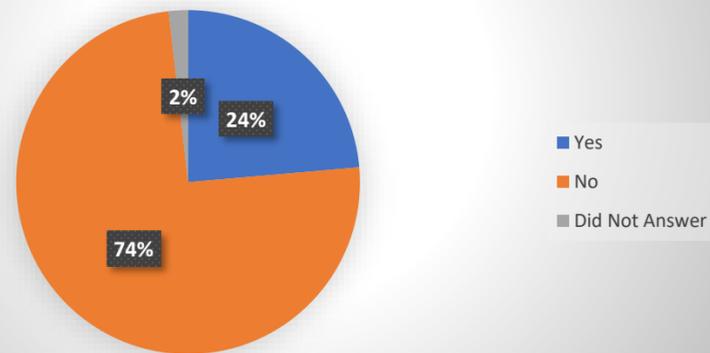
Q2: If so, do you think the fees are reasonable for the services provided by SNCHC?



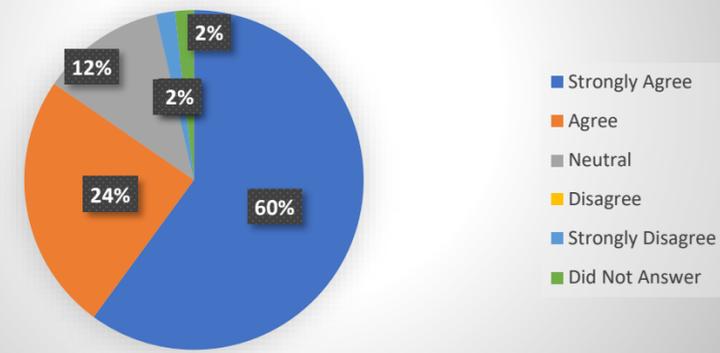
Q3: Does the sliding fee make it easier to access services at the Health Center?



Q4: Have you ever canceled an appointment due to lack of funds to pay the discounted fee?



Q5: Would you refer others to the Health Center knowing we have a Sliding Fee Discount Program available?



# Primary Care Sliding Fee Schedule

Income % of the Federal Poverty Level	100% or below	101%-150%	151%-175%	176%-199%	200%+
Program Code	P0	P1	P2	P3	P4
Slide Discount %	Nominal Fee	82.5%	77.5%	72.5%	0%
Provider Visit Fees	\$20	\$35	\$45	\$55	\$200
Nurse Visit ONLY Fees	\$4	\$7	\$9	\$11	\$40

# Sexual Health Clinic Sliding Fee Schedule

Income % of the Federal Poverty Level	100% or below	101%-150%	151%-175%	176%-199%	200%+
Program Code	P0	P1	P2	P3	P4
Slide Discount %	Nominal Fee	82.5%	77.5%	72.5%	0%
Provider Visit Fees	\$20	\$35	\$45	\$55	\$200
<del>SHC Follow Up Fees</del>	<del>\$11</del>	<del>\$18</del>	<del>\$24</del>	<del>\$29</del>	<del>\$105</del>
Nurse Visit ONLY Fees	\$4	\$7	\$9	\$11	\$40

# Family Planning Sliding Fee Schedule

Income % of the Federal Poverty Level	100% or below	101%-150%	151%-175%	176%-199%	200%-250%	251%+
Program Code	P0	P1	P2	P3	P4	P5
Slide Discount %	Nominal Fee	82.5%	77.5%	72.5%	70%	0%
Provider Visit Fees	\$0	\$35	\$45	\$55	\$60	\$200
Nurse Visit ONLY Fees	\$0	\$7	\$9	\$11	\$12	\$40

# Family Planning Contraception

Income % of the Federal Poverty Level	100% or below	101%-150%	151%-175%	176%-199%	200%-250%	251%+
Program Code	P0	P1	P2	P3	P4	P5
Slide Discount %	100%	82.5%	77.5%	72.5%	50%	0%
Implant	\$0	\$95	\$122	\$149	\$272	\$545
IUD	\$0	\$56	\$72	\$88	\$161	\$323
Depo Shot	\$0	\$5	\$6	\$8	\$15	\$30

# Ryan White Sliding Fee Schedule

Income % of the Federal Poverty Level	100% or below	101%-150%	151%-175%	176%-199%	200%-300%	301-399% +	400% +
Program Code	P0	P1	P2	P3	P4		
Slide Discount %	Nominal Fee	82.5%	77.5%	72.5%	0%	0%	0%
Provider Visit Fees	\$0	\$35	\$45	\$55	\$200	\$200	\$200
Nurse Visit ONLY Fees	\$0	\$7	\$9	\$11	\$40	\$40	\$40
No charges beyond ___% of pt.'s gross annual income	0%	5%	5%	5%	7%	10%	N/A

# Pharmacy Sliding Fee Schedule

Income % of the Federal Poverty Level	100% or below	101%-150%	151%-175%	176%-199%	200%+
Program Code	P0	P1	P2	P3	P4
Medications (up to 30-day supply)	\$7	\$12	\$17	\$22	Full cost/\$22
Insulin (vial/pen)	\$10	\$10	\$10	\$10	\$10
Diabetic supplies	\$10	\$10	\$10	\$10	\$10
Glucose Meter	\$20	\$20	\$20	\$20	\$20

# MOTION

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***Motion to Accept the Recommendations from the Finance Committee and Approve the SNHD Clinical Sliding Fee Schedule, as presented.***





THANK YOU  
QUESTIONS?

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