

# SNCHC Sliding Fee Discount Schedule

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# HRSA Sliding Fee Discount 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)*

- **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 Discount 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)*

- 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)*

- ▶ 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

# Sliding Fee Program in Action

- ▶ 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.**

# Sliding Fee Discount Schedule Analysis

- ▶ 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.
  - ▶ Participation rate of making payments on Nominal fees among SNCHC patients seen in calendar year 2022 (CY22)

# Market Study of Fees for FQHCs in Nevada

- ▶ Eight (8) Health Centers queried in March 2023. They include:
  - ▶ All for Health, Health for All
  - ▶ Community Health Alliance
  - ▶ Firstmed Health & Wellness
  - ▶ First Person Care Clinic
  - ▶ Hope Christian Health Center
  - ▶ Nevada Health Centers
  - ▶ Northern Nevada Hopes
  - ▶ Silver State Health

# Market Study of Fees for FQHCs in Nevada

FQHC	SNCHC	A	B	C	D	E	F	G	H
Lowest Slide Scale Fee	\$20	\$20	\$20	\$0	\$40	\$35	\$10	\$35	No Answer Not Available
Highest Slide Scale Fee	\$55	\$75	\$90	\$75	\$70	\$95	\$50	\$90	No Answer Not Available
Full Price Fee	\$200	\$75	\$100	\$75	\$200	Ala Carte-billed after visit	Ala Carte-billed after visit	\$100	No Answer Not Available



## CY22 Payments on Claims for Uninsured Patients with Incomes at or Below 100% of the Federal Poverty Level

DEPARTMENT	Claim Count	Claim without a Payment	% of Claims with Payment
FQHC - Behavioral Health	482	53	89%
FQHC - Family Planning	304	218	28%
FQHC - Primary & Preventative Care	1,954	296	85%
FQHC - Refugee Health	18	18	0%
FQHC - Ryan White	282	207	27%
Sexual Health	2,199	426	81%
<b>TOTALS</b>	<b>5,239</b>	<b>1218</b>	<b>77%</b>

77% of claims have a payment as of 12/31/22 and the average of that payment is \$18.80.

# 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	<del>\$200</del>
SHC Follow Up Fees	\$11	\$18	\$24	\$29	\$105
Nurse Visit ONLY Fees	\$4	\$7	\$9	\$11	<del>\$40</del>

Current schedule includes discounts @ 200% - 250% FPL  
 Proposed new schedule aligns with HRSA requirements

# 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

# 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

Questions?

Thank you!