



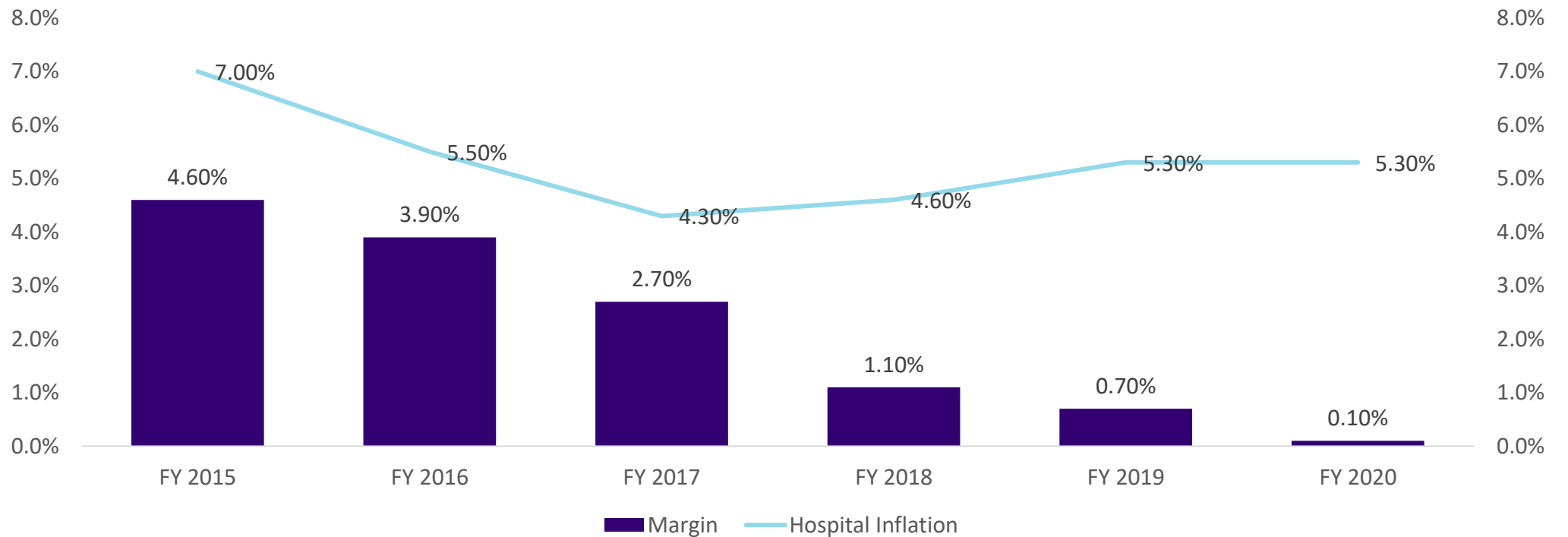
**Vermont Association
of Hospitals
and Health Systems**

Hospitals and Financial Assistance Policies H.287

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Hospital System is Fragile



Some Complicating Factors

- Medicare requirements
 - The patient's indigence must be determined by the provider, not by the patient; i.e., a patient's signed declaration of his inability to pay his medical bills cannot be considered proof of indigence. 42 C.F.R. § 413.89; PRM § 312
 - Provider should take into account a patient's total resources, including analysis of assets (only those convertible to cash and not required for daily living) 42 C.F.R. § 413.89; PRM § 312
 - [Faxton-St. Luke's Health Care Provider vs. NGS, Inc., 2015](#)
- Expanding discounts up to 500% FPL would have a fiscal impact
- No Surprises Act
 - Good faith estimate
 - Advanced explanation of benefits

Areas of Agreement

- Minimum of 200% FPL for free care
- 400% FPL for discounted care
- Household = Tax household & domestic partners
- Vermont resident, not health/hospital service area resident

Estimated Uncompensated Care Costs Compared to DSH Payments

