

IMPORTANT REMINDERS

- A Discount Application and proof of income are required to apply for the Sliding Fee Scale Program.
- Income verification MUST be provided before you are enrolled into the program, along with a denial from Michigan Medicaid.
- The Sliding Fee Scale information must be updated when there is a significant change, such as obtaining insurance coverage, receiving Medicaid or a change in household income, or at least every twelve (12) months, whichever occurs first.
- **A \$10.00 minimum payment is required** from all Cares Sliding Fee Scale patients that qualify for a discount; Payment will be collected prior to the patient receiving medical treatment.
- This discount applies only to accounts in good standing. Any accounts that are not current are ineligible and will be asked to make regular weekly/monthly payments.

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BARAGA COUNTY MEMORIAL HOSPITAL & BCMh Physician Group RURAL HEALTH CLINIC (RHC)

CARES SLIDING FEE SCALE PROGRAM



Providing medical services to
those in need regardless of
ability to pay.

WHAT IS THE CARES SLIDING FEE SCALE PROGRAM?

The Cares Sliding Fee Scale program allows patients who are uninsured or underinsured to receive health care services at a reduced cost at BCMH and the BCMH Physician Group Rural Health Clinic. To be eligible for a Sliding Fee discount, one must provide evidence of household income, such as prior year's tax return, last paycheck stub and a Medicaid Denial. The discount varies depending upon the size of the family and the number of people living in the household.

The maximum Sliding Fee discount available is up to 100%, excluding, **the minimum payment required** which is \$10.00 and is collected from patients.

WHAT IS REQUIRED TO APPLY?

To apply for the Cares Sliding Fee Scale program an individual is required to:

- Complete an application.
- Provide proof of "household income" or financial assistance. Household income is defined as "*Gross income earned*" from ALL persons residing within the home.
- Medicaid application denial.
- You do not have and are not eligible for insurance coverage or another payor source or are underinsured based on family size and income (Proof of Market Place Exemption is required if applicable).
- Driver license or State I.D.

NON-COVERED SERVICES:

- Cosmetic and elective procedures.
- Long term care, swing bed, durable medical equipment, home care services and hospice.
- Services purchased outside the hospital such as reference labs and radiologist fees.

HOW DOES THE PROGRAM WORK?

When you call to make an appointment, you will be asked what type of insurance you have. If you have none, or are not eligible or are underinsured you will be asked to come prepared with evidence of your household income and a minimum payment of \$10.00. Please provide prior year's tax return and most recent paycheck stub along with Medicaid application denial.



When you arrive, you will be asked to complete a cares sliding fee scale discount application, and copies will be made of your documentation. A copy of the application will be provided to you.

The documentation you supply will be used to determine the maximum discount to which you are entitled, which ranges from 0%-100%, except for the \$10.00 minimum payment. The allowable discount is entered on the account and applied to any additional balance due on the account, which

will be calculated at check-out or when final charges are determined.

If the required documentation has not yet been provided, the account will be flagged as "PENDING," and will not be in effect until the documentation is received.

UPDATE AND PAYMENT REQUIREMENTS.

Financial documentation for the Sliding Fee Scale Program must be provided **EVERY TWELVE (12) MONTHS.**

When updates are needed, the account will again be flagged as "PENDING" and you will be asked to provide current documentation verifying household income. The requested information must be received within sixty (60) days of the date of service, or by your next appointment.

If balances are not paid in a timely manner, you may be asked to agree to a payment plan. We are willing to work with you to develop a reasonable payment schedule based upon your ability to pay. It is very important that the agreed-upon amount is paid regularly and on time. If not, it may become necessary to place the account with a collection agency.

If the account goes to collections, your discount will be reversed. Your account will be "locked" and no further appointments can be made in the clinic until the overdue balance is paid in full.