



## **CHARITY CARE POLICY:**

Since 1945, Fairbanks has served individuals and their families who struggle with addiction by extending financial aid and assistance to those who face financial situations which may limit access to treatment and recovery services. Fairbanks has determined that in order to promote the health and well-being of the patients and communities we serve, uninsured, underinsured and individuals with limited financial resources will be eligible for financial aid. Offering this kind of assistance is fundamentally important to fulfilling the non-profit mission, vision and values of Fairbanks while also balancing the need to sustain Fairbanks and its mission for many generations to come. To be considered for aid and assistance, the patient and all other person's willing and able to participate in covering the cost for treatment must cooperate with Fairbanks to provide information and documentation necessary to determine eligibility. Those individuals who are seeking admission to Fairbanks have the opportunity to meet with a financial counselor to determine what resources are available. Fairbanks has posted signage in the Access Center area noting that charity care is available. In addition, there is an email link on the Fairbanks website referring to the Charity Care policy.

Therefore, Fairbanks has determined that when a patient's financial resources are below 250% of the Federal Poverty Level, the patient qualifies for Charity Care. Charity care is defined as follows:

### **Charity Care Write-offs:**

Individuals who qualify for charity care will receive a reduction to charges called a charity care write-off. The percentage of the reduction will be determined by the patient's income and family size in relationship to the most recently published Federal Poverty Level guidelines attached:

- Charity Care at a 50% reduction in charges \* – 250% of the Federal Poverty Guidelines
- Charity Care at a 60% reduction in charges – 200% of the Federal Poverty Guidelines
- Charity Care at a 70% reduction in charges – 150% of the Federal Poverty Guidelines

\*Charity Care will be limited to the 50% (250% of the Federal Poverty Level) for any individuals outside of the Central Indiana area (including out of state client -see attached map). This determination was made due to the significant funding to the organization by foundations, individuals, corporations, and others in Central Indiana. If any deposit is required (both the part paid up-front and any part that may be deferred), the deposit will be deducted from the remaining balance on the patient bill after any charity care write-off has been applied.

The charity care write-off will apply to individuals receiving services at Fairbanks. Residents may request rent assistance at the Supportive Living Program based on need and availability of charity care funds.

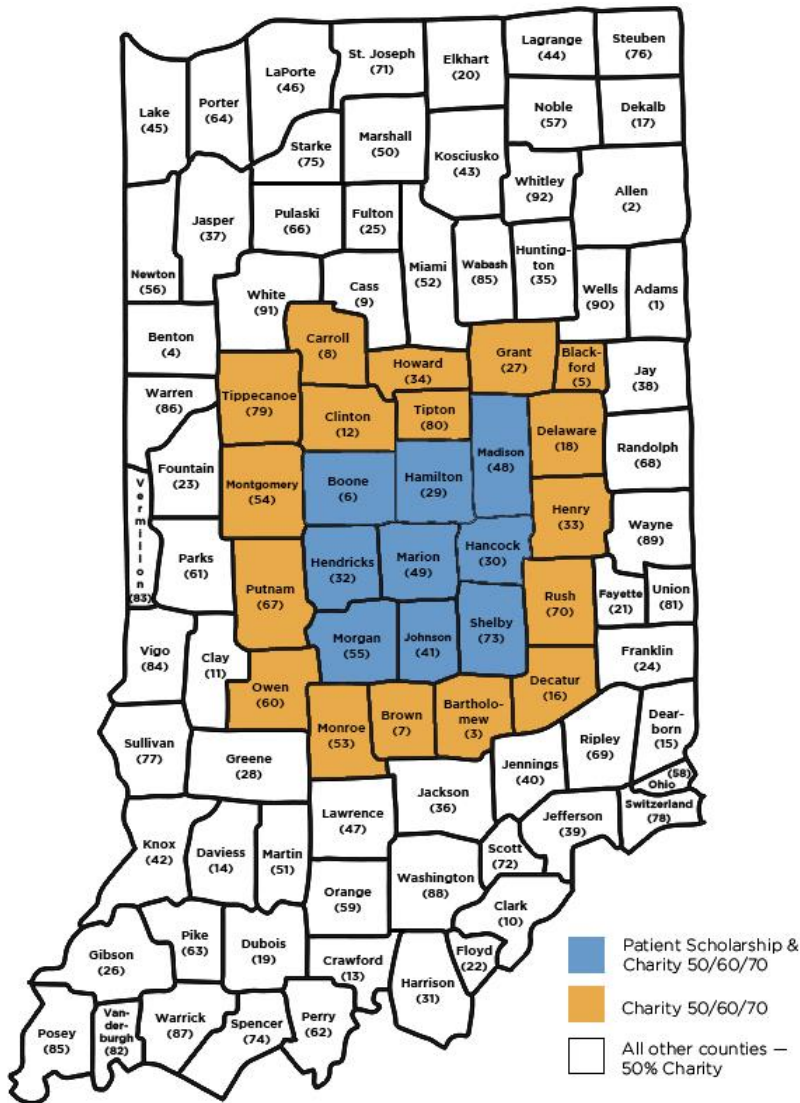
### **Patient Scholarship Fund:**

For uninsured patients, the Fairbanks Patient Scholarship Fund (when available) is also a resource that can assist in supporting the cost of a person's treatment. Priority for assistance will be given to persons in Marion and the contiguous counties (including Madison County). This limited fund is generated through contributions, United Way dollars, and restricted grants. Each year efforts will be made to raise funds for the Patient Scholarship Fund.

Fairbanks Charity Grid - 2018

Family Size	2017 Federal Poverty Guide	50% 250%-201%	60% 200% - 151%	70% - Less	150% - Less
1	\$12,140	\$30,350	\$24,280		\$18,210
2	\$16,460	\$41,150	\$32,920		\$24,690
3	\$20,780	\$51,950	\$41,560		\$31,170
4	\$25,100	\$62,750	\$50,200		\$37,650
5	\$29,420	\$73,550	\$58,840		\$44,130
6	\$33,740	\$84,350	\$67,480		\$50,610
7	\$38,060	\$95,150	\$76,120		\$57,090
8	\$42,380	\$105,950	\$84,760		\$63,570

\*\*Add \$4,320 for each additional family member beyond 8



As a "self-pay" patient, I recognize that I may be eligible for Fairbanks' sliding fee scale or Patient Scholarship Funding based on my income and the size of my household. My access to Fairbanks' sliding fee scale is wholly dependent upon my financial status; however, my eligibility for Patient Scholarship Funding is also based on my participation and commitment to the recovery process and the availability of funds. In order to qualify for either the sliding fee scale or the Patient Scholarship, I am required to submit the following within 15 days of my admission:

- Pay Stubs (for the previous 3 months)
- Tax forms for the prior year
- W-2 forms for the prior year
- Letter of Welfare/Social Security/Disability Benefits/ Unemployment

I recognize that Fairbanks Patient Scholarship is only given when the following requirements are met:

- a) Fairbanks has funds available,
- b) the patient participates in and displays a commitment to the recovery process, and
- c) the patient has proven a genuine financial need.

Patients that are uncooperative, administratively discharged, fail to provide proof of financial need or leave a treatment program against medical advice can forfeit any eligibility for Fairbanks Patient Scholarships.

My proof of financial eligibility is to be submitted to the Access Center Financial Counselor. I can call 317-572-9379 for an appointment to meet and submit my request for this reduction in fees. I also recognize that failure to provide this information within the 15 days can rescind any financial assistance and will result in my being billed at 100% of Fairbanks' standard fees.

Due date for submission of paperwork: \_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_\_

Witness \_\_\_\_\_

Date \_\_\_\_\_

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