

Texas Nonprofit Hospitals *
Part II
Summary of Current Hospital Charity Care Policy and Community Benefits
for Inclusion in DSHS Charity Care Manual as Required
by Texas Health and Safety Code, § 311.0461**
2017

Facility Identification (FID): 2153723	(Enter 7-digit FID# from attached hospital listing)***
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Name of Hospital: Knapp Medical Center **County:** Hidalgo

Mailing Address: P.O. Box 1110

Physical Address if different from above: 1401 E 8th Street

Effective Date of the current policy: 05/01/2018

Date of Scheduled Revision of this policy: 05/01/2019

How often do you revise your charity care policy? Annually

Provide the following information on the office and contact person(s) processing requests for charity care.

Name of the office/department: Business Office

Mailing Address: P.O. Box 659830 Msc #100, San Antonio, TX 78265-9130

Contact Person: Olivia Carrasco Title: Insurance Supervisor

Phone: (956) 969-5141 Fax: (956) 969-5508 E-Mail: ocarrasco@primehealthcare.com

Person completing this form if different from above:

Name: Elizabeth Candanoza Phone: (956) 969-5103

*This summary form is to be completed by each **nonprofit** hospital. Hospitals in a system must report on an individual hospital basis. Public hospitals, for-profit hospitals participating in the Medicaid disproportionate share hospital program and exempt hospitals are not required to complete this form. This form is only available in PDF format at DSHS web site: www.dshs.texas.gov/chs/hosp under 2017 Annual Statement of Community Benefits Standard.

**The information in the manual will be made available for public use. Please report most current information on the charity care policy and community benefits provided by the hospital.

*** The list is also available on DSHS web site: www.dshs.texas.gov/chs/hosp/.

I. Charity Care Policy:

1. Include your hospital’s Charity Care Mission statement in the space below.

A significant objective of Prime Healthcare Non-Profit Facilities is to provide care for patients in times of need. Prime Healthcare Non-Profit Facilities provide charity care and a discounted payment program as a benefit to the communities we serve as for-profit hospitals. To this end, Prime Healthcare Non-Profit Facilities are committed to assisting low-income and/or uninsured eligible patients with appropriate discount payment and charity care programs. All patients will be treated fairly, with compassion and respect.

2. Provide the following information regarding your hospital’s current charity care policy.

a. Provide definition of the term **charity care** for your hospital.

Knapp Medical Center offers a financial assistance program for those patients who meet the eligibility tests described below. The intent of this Financial Assistance Policy (the “Policy”) is to satisfy the requirements of Section 501(r) of the Internal Revenue Code and Texas Health & Safety Code sections 311.031 to 311.048 and 324.101; all provisions should be interpreted accordingly. A patient qualifies for charity care as described in Section (III)2 below if all of the following conditions are met: (1) the patient does not have third party coverage from a health insurer, health care service plan, union trust plan, Medicare, or Medicaid, or is underinsured, as determined and documented by the hospital; (2) the patient’s injury is not a compensable injury for purposes of workers’ compensation, automobile insurance, or other insurance as determined and documented by the hospital; (3) the income of the Patient’s Family does not exceed two hundred percent (200%) of the current Federal Poverty Level; and (4) the patient has monetary assets of less than ten thousand dollars (\$10,000.00).

b. What percentage of the federal poverty guidelines is financial eligibility based upon? Check one.

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- 1. 100% 4. <200%
- 2. <133% 5. Other, specify _____
- 3. <150%

c. Is eligibility based upon net or gross income? Check one.

d. Does your hospital have a charity care policy for the Medically Indigent?

YES NO If yes, provide the definition of the term **Medically Indigent**.

“Medically Indigent”: A medically indigent patient is a person whose medical or hospital bills, after payment by third-party payors, exceed a specified percentage of the patient’s annual gross income, determined in accordance with the Hospital’s eligibility criteria set forth in this policy, and the person is financially unable to pay the remaining bill.

e. Does your hospital use an Assets test to determine eligibility for charity care?

YES NO If yes, please briefly summarize method. In determining a patient’s monetary assets, the Hospital shall not consider retirement or deferred compensation plans qualified under the Internal Revenue Code, non-qualified deferred compensation plans, the first ten thousand dollars (\$10,000.00) of

f. Whose income and resources are considered for income and/or assets eligibility determination?

- 1. Single parent and children
- 2. Mother, Father and Children
- 3. All family members

4. All household members

5. Other, please explain

All adult family members

g. What is included in your definition of income from the list below? Check all that apply.

- 1. Wages and salaries before deductions
- 2. Self-employment income
- 3. Social security benefits
- 4. Pensions and retirement benefits
- 5. Unemployment compensation
- 6. Strike benefits from union funds
- 7. Worker's compensation
- 8. Veteran's payments
- 9. Public assistance payments
- 10. Training stipends
- 11. Alimony
- 12. Child support
- 13. Military family allotments
- 14. Income from dividends, interest, rents, royalties
- 15. Regular insurance or annuity payments
- 16. Income from estates and trusts
- 17. Support from an absent family member or someone not living in the household
- 18. Lottery winnings
- 19. Other, specify _____

3. Does application for charity care require completion of a form? YES NO

If YES,

a. **Please attach a copy of the charity care application form.**

b. How does a patient request an application form? Check all that apply.

- 1. By telephone
- 2. In person
- 3. Other, please specify online form

c. Are charity care application forms available in places other than the hospital?

YES NO If, YES, please provide name and address of the place.

d. Is the application form available in language(s) other than English?

YES NO

If yes, please check

Spanish Other, please specify _____

4. When evaluating a charity care application,

a. How is the information verified by the hospital?

1. The hospital independently verifies information with third party evidence (W2, pay stubs)

2. The hospital uses patient self-declaration

3. The hospital uses independent verification and patient self-declaration

b. What documents does your hospital use/require to verify income, expenses, and assets?
Check all that apply.

1. W2-form

2. Wage and earning statement

3. Pay check remittance

4. Worker's compensation

5. Unemployment compensation determination letters

6. Income tax returns

7. Statement from employer

8. Social security statement of earnings

9. Bank statements

10. Copy of checks

11. Living expenses

12. Long term notes

13. Copy of bills

14. Mortgage statements

15. Document of assets

16. Documents of sources of income

17. Telephone verification of gross income with the employer

18. Proof of participation in gov't assistance programs such as Medicaid

19. Signed affidavit or attestation by patient

20. Veterans benefit statement

21. Other, please specify _____

5. When is a patient determined to be a charity care patient? Check all that apply.

a. At the time of admission

b. During hospital stay

c. At discharge

d. After discharge

e. Other, please specify _____

6. How much of the bill will your hospital cover under the charity care policy?

a. 100%

b. A specified amount/percentage based on the patient's financial situation

c. A minimum or maximum dollar or percentage amount established by the hospital

d. Other, please specify _____

7. Is there a charge for processing an application/request for charity care assistance?

YES NO

8. How many days does it take for your hospital to complete the eligibility determination process? 31

9. How long does the eligibility last before the patient will need to reapply? Check one.

a. Per admission

b. Less than six months

c. One year

d. Other, specify _____

10. How does the hospital notify the patient about their eligibility for charity care? Check all that apply.
Check all that apply?

- a. In person
- b. By telephone
- c. By correspondence
- d. Other, specify _____

11. Are all services provided by your hospital available to charity care patients?

YES NO

If NO, please list services not covered for charity care patients (e.g. transplant services, ER services, other outpatient services, physician's fees).

12. Does your hospital pay for charity care services provided at hospitals owned by others?

YES NO

II. Community Benefits Projects/Activities:

Provide information on name, brief description (3 lines), target population or purpose (3 lines) for each of the community benefits projects/activities CURRENTLY being undertaken by your hospital (example: diabetes awareness).

Knapp Medical Center's Wellness Program offers low-priced lab screenings (ranging from \$7 to \$20) to encourage healthy lifestyles. This program was developed as an alternative for those without health insurance who could not otherwise afford expensive tests. The Knapp Volunteer Program assists students needing volunteer hours to enter gain volunteer experience in a healthcare setting and for older adults who need to feel a sense of purpose. The Junior Volunteer program gives students 15 to 18 years of age an opportunity to embrace volunteering and learn about potential health careers. The hospital patients and staff benefit greatly from volunteer efforts as well. During the months of June and July in 2017, Knapp Medical Center sponsored two Family Fun, Fitness & Film events at Weslaco City Park. During the events, local residents are encouraged to come out to the park and walk the track in an effort to improve their fitness and quality of life. More than 200 local residents participated in these events. Since September 2009, Knapp Medical Center has distributed 417 infant and booster seats to indigent families (including 75 during 2017). To be eligible for a car seat, the parent must receive training on proper car seat installation and how to correctly fit child harnesses. Childbirth Education Classes are held for expectant parents, and each year Knapp Medical Center serves as an inspection station for the Safe Riders car seat inspection program. As part of the program, Knapp offers local parents the opportunity to have car seats they own inspected. If an inspected car seat is found to be damaged or on a recall list, parents are provided a new car seat free of charge. In 2017, Knapp Medical Center staff inspected 27 car seats, replacing 25 of them free-of-charge (this in addition to the 75 infant and booster seats mentioned above). To help promote breast cancer awareness and the importance that early detection plays in the fight against breast cancer, Knapp Medical Center participated in a "Bras Ending Breast Cancer" campaign which was hosted by South Texas College in Weslaco. Held in early October, decorated bras were displayed and educational information was distributed. In addition to offering free information on breast health, the event raised funds to provide screening mammograms for local indigent women. The main vehicle for the fundraising aspect of the campaign is a bra decorating contest. As part of the contest, entry fees are collected to raise funds to provide screening mammograms for local indigent women. Since the project's inception in through the 2017 reporting period, Bras Ending Breast Cancer has funded more than 310 screening mammograms. Also at Knapp Medical Center, dieticians taught diabetes and renal failure patients about portion control and meal planning using a culturally-sensitive chart that provides visual cues to food choices rather than words. This chart was printed with a grant from the Knapp Volunteer Auxiliary. The Knapp Auxiliary decided that diabetes management tools were too important not to share. They took over marketing of the food charts as an outreach project. The charts are provided free to Knapp dieticians -- and sales of the charts to other organizations funds additional printings of this valuable educational resource.

Additional Information:

Use this space if more space is required for comments or to elaborate on any of the information supplied on this form. Please refer to the response by question and item number.

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NOTE: This is the sixteenth year the charity care and community benefits form is being used for collecting the information required under Texas Health and Safety Code, § 311.0461. If you have any suggestions or questions, please include them in the space below or contact Dwayne Collins, Center for Health Statistics, Texas Department of State Health Services at (512)776-7261 or fax:(512)776-7344 or E-mail: dwayne.collins@dshs.texas.gov.

Name of Hospital: _____ City: _____

Contact Name: _____ Phone: _____

Suggestions/questions: