

SUMMARY OF REQUEST

DATE: June 28, 2023

FACILITY: Broward Health Hospitals

PROGRAM/PRODUCT LINE: Revenue Cycle

REQUEST: Seeking approval for revisions to the Financial Assistance Program Policy (FAP) GA-018-055


PURPOSE: To broaden the criteria for financial assistance eligibility

CAPITAL REQUIRED: 0.00

FISCAL IMPACT: None

BUDGET STATUS: Not applicable

LEGAL REVIEW: The policy was subject to General Counsel's review and approval as to legal form.

APPROVED:  Shane Strum 06/27/2023 15:39 EDT DATE: _____
Shane Strum, President/CEO

M E M O R A N D U M

TO: Board of Commissioners

FROM: Shane Strum, President/Chief Executive Officer

DATE: June 28, 2023

SUBJECT: Seeking approval for revisions to the FAP policy GA-018-055

BACKGROUND

North Broward Hospital District d/b/a “Broward Health” provides financial assistance to patients who receive emergency care and/or other medically necessary services in a Broward Health Facility and who satisfy the eligibility requirements for financial assistance under policy GA-018-055.

ACTION/PROJECT DESCRIPTION

Seeking approval for revisions to the Financial Assistance Program Policy (FAP) GA-018-055. The following is a summary of changes for the policy.

- Changed the eligibility percentage of the Federal Poverty Guidelines (FPG) for financial assistance from 200% to 300%.
- Eligibility for one-time approval may be provided where the hospital charges due from the patient exceed 25% of the family’s gross annual income. However in no case shall the hospital charges for a patient whose family income exceeds 400% of the FPG be considered for financial assistance. This applies to both residents and non-residents as defined in the policy.
- Allow for the identification of Presumptive Financial Assistance Determinations via an electronic screening software tool as Broward Health recognizes that a portion of the uninsured population will not engage in the traditional application process.
 - This predictive scoring tool utilizes public data and includes estimates for income, household size, and family liquidity.

FINANCIAL/BUDGETARY IMPACT

Not Applicable

JUSTIFICATION

To broaden the criteria for financial assistance eligibility

STAFF RECOMMENDATION

Therefore, it is requested that the Board of Commissioner of the North Broward Hospital District approve the Financial Assistance Policy as amended and as presented.