

**A NEW TOMORROW  
SLIDING FEE SCALE POLICY**

**Tara L. Corbett, MS, LPC, LPC-S      Quanetta S. Jefferson, MA, LPC  
Sara Anderson MS, LPC                      D'Andra Scott MA, LPC-A  
Kennedy Lucas MA, LPC-A  
26 Wesmark Ct., Sumter, SC 29150  
Phone: (803) 883-4981  
Fax: (803) 883-5492**

**Effective Date: September 2021**

**PURPOSE:** All patients seeking health care services at A NEW TOMORROW are assured they will be served regardless of inability to pay. We are offering these services to those who have little to no means, to pay for their medical services.

A NEW TOMORROW will base program eligibility on a person's ability to pay and will not discriminate on the basis of their race, color sex, national origin, religion, disability, age, sexual orientation, or gender identity. The **Federal Poverty Guidelines** are used in creating and updating the sliding fee schedule to determine eligibility, providing a nominal fee of \$25.00 for our discount policy.

**PROCEDURE:** The following guidelines are to be followed in providing sliding fee discount:

1. Notification: A NEW TOMORROW will notify patients of the sliding fee scale by:
  - a. Payment Policy Brochure will be available to all patients at time of service.
  - b. Notification of the Sliding Fee Program will be offered to each patient upon admission.
  - c. Sliding Fee Discount Program application will be included with collection notices sent out by A New Tomorrow.
  - d. An explanation of our Sliding Fee Discount Program and our application form are available on A New Tomorrow's website( anewtomorrowbhs@gmail.com)
  - e. A NEW TOMORROW will place notification of the Sliding Fee Scale in the clinic waiting area.
2. Request for discount: Sliding Fee discount will only be made available for clinic visits. Requests for discounted services may be made by patients, family members, social services staff, or authorized guardian with knowledge of existing financial hardship.
3. Administration: The Sliding Fee Discount Program procedure will be administered through the Business Office Manager Or his/her designee. Information about the Sliding Fee Discount Program policy and procedure will be provided to patients, Staff are offered assistance for completion of the application. Dignity and confidentiality will be respected for all who seek and/or provided health care services.
4. Completion of Application: The patient, or responsible party, must complete the sliding fee application in its entirety. Staff will be available, as needed, to assist patient/responsible party with application. By signing the Sliding Fee Discount Program application, persons are confirming their income to A NEW TOMORROW as disclosed on the application form.
5. Eligibility: Discount will be based on applicant's income and family size only.
  - a. Family is considered as: a group of 2 or more people related by birth, marriage, or adoption and residing together; all such people (including related subfamily members)

are considered as members of one family. A New Tomorrow will also accept non-related household members when considering family size.

- b. The income will include: gross wages, salaries, tips; income from business and self-employment; unemployment compensation; worker's compensation; Social Security; Supplemental Security Income; veteran's payments; survivor benefits; pension or retirement income; interest; dividends; royalties; income from rental properties, estates, and trusts; alimony; child support; and other miscellaneous sources.
6. Income Verification: Applicants may provide one of the following: prior year W-2, two most recent pay stubs, or a letter from employer, or Form 4506-T (IF W-2 not filed). Self-employed individuals will be required to submit details of the most recent three months of income and expenses for the business. Adequate information must be made available to determine eligibility for the program. Self-declaration of income may be used. Patients who are unable to provide written verification may provide a signed statement of income.
7. Discounts: Those with income at or below 100% of FPL will pay a nominal fee of \$25. Those with incomes above 100% of poverty, but at or below 200% of poverty, will be charged a discounted rate according to the attached sliding fee schedule. The sliding fee schedule will be updated during the first quarter of every calendar year with the latest FPL Guidelines.
8. Nominal Fee: Those with income at or below 100% of FPL will pay a nominal fee of \$25 according to the attached sliding fee schedule and based only on their family size and income. However, patients will not be denied services due to an inability to pay. The nominal fee is not a threshold for receiving care and thus, is not a minimum fee or co-payment.
9. Waiving if Charges: In certain situations, patients may not be able to pay the \$25 nominal fee. Waiving of charges must be approved by A New Tomorrow's designated official. Any waiving of charges should be documented in the patient's file along with an explanation.
10. Application Notification: The Sliding Fee Discount Program determination will be provided to the applicant(s) in writing and will include the percentage of Sliding Fee Discount Program write off, or, if applicable, the reason for denial. If the application is approved for less than a 100% discount or denied, A New Tomorrow will work with the patient and/or responsible party to establish payment arrangements. Sliding Fee Discount Program application cover outstanding patient balances for six months prior to application date and any balances incurred within 12 months after the approved date, unless their financial situation changes significantly. The applicant has the option to reapply after the 12 months have expired or anytime there has been a significant change in the family income. When the applicant reapplies, the look back period will be the lesser of six months or the expiration of their last Sliding Fee Discount Program application.
11. Refusal to Pay: If a patient verbally expresses an unwillingness to pay or vacates the premises without paying for services, the patient will be contacted in writing regarding their payment obligations. If the patient is not on the sliding fee schedule, a copy of the Sliding Fee Discount Program application will be sent with the notice, If the patient does not make effort to pay or fails to respond within 60 days, this constitutes refusal to pay. At this point in time, A New Tomorrow

can explore options not limited to, but including offering the patient a payment plan, waiving of charges, or referring the patient to collections.

- 12) Record Keeping: Information related to Sliding Fee Discount Program decisions will be maintained and preserved in a centralized file located in the Business Office Manager's Office, in an effort to preserve the dignity of those receiving free or discounted care.
  - a). Applicants that have been approved for the Sliding Fee Discount Program will be logged in A New Tomorrow's practice management system, noting names of applicants, dates of coverage and percentage of coverage.
  - b) The Business Office Manager will maintain an additional monthly log identifying Sliding Fee Discount Program recipients and dollar Amounts, Denials and applications not returned will also be logged.
  
- 13) Policy and Procedure Review: The SFS will be updated based on the current Federal Poverty Guidelines. A New Tomorrow will also review possible changes in our policy and procedures and for examining institutional practices which may serve as barriers preventing eligible patients from having access to our community provisions.
  
- 14) Budget: During the annual budget process, an estimated amount of Sliding fee Discount Program service will be placed into the budget as a deduction from revenue.

ATTACHMENTS:

2022 Sliding Fee Schedule

Patient Application for the Sliding Fee Discount Program

APPROVAL: \_\_\_\_\_

REVISED: \_\_\_\_\_

REVIEWD BY: \_\_\_\_\_