

Eligibility Documentation and Sliding Fee Scale

March 11th, 2015



Applicability

- ▶ In accordance with 65E-14.018 and CFCHS Sliding Fee Scale Policy
 - ▶ Provider shall make a determination of ability to pay in accordance with the sliding fee scale for all individuals seeking substance abuse and mental health services.
 - ▶ Payment of fees is not a pre-requisite to receive services.

- ▶ The Sliding Fee scale does not apply to the following cost centers:
 - Case Management
 - Crisis Stabilization
 - Crisis Support/Emergency
 - Drop-In/Self Help Centers
 - Information and Referral
 - Intensive Case Management
 - Mental Health Clubhouse
 - Outreach
 - Prevention (Indicated, Selective, Universal Direct, Universal Indirect)
 - Substance Abuse Inpatient Detoxification
 - Substance Abuse Outpatient Detoxification

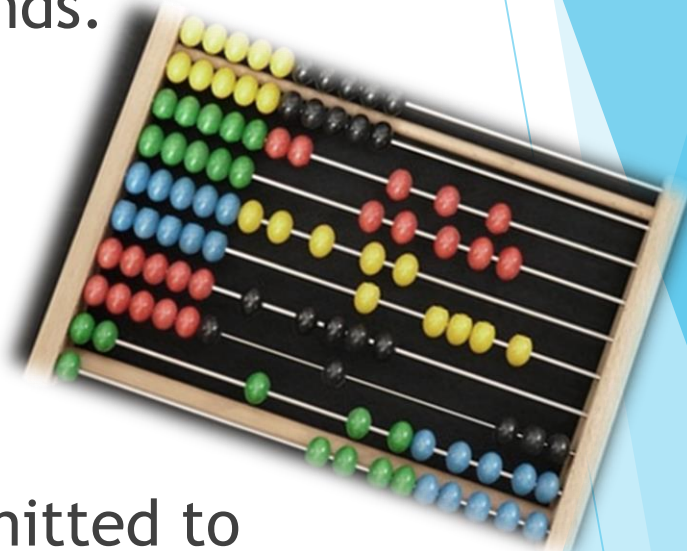


Determining and Documenting Eligibility

- ▶ According to F.S. 394.674, To be eligible for substance abuse and mental health services funded by the department, an individual must fall within of at least one of the department's priority populations approved by the Legislature.
- ▶ Exhibit A, Section B, Client/Participant Eligibility of provider contracts states:
The Subcontractor agrees that all persons meeting the target population descriptions in the table provided in exhibit A, are eligible for services based on the availability of resources. A detailed description of each target population is contained in F.S. 394.674, Florida Statute.
- ▶ Exhibit A, Section C, Client/Participant Determination of provider contracts states:
Determination of client eligibility is exclusively the responsibility of the Subcontractor.
- ▶ CFCHS policy states:
Subcontractors must develop written procedures for determining household income for purpose of assessing, billing and collecting client fees.
- ▶ Household income defined by I.R.C. 36B(d)(2)(1986) with exceptions pursuant to 42 C.F.R. 435.603(e)

Sliding Fee Scale

- ▶ Must be utilized with all individuals receiving services that are paid for by state, federal or local match funds.
- ▶ Must be updated annually in conjunction with Federal Poverty Guidelines.
- ▶ Sliding Fee Scale per organization must be submitted to CFCHS Contract Manager by July 30th of each year.
- ▶ CFCHS will periodically monitor



Collecting Fees

- ▶ Subcontractors shall request a sliding fee payment from persons:
 - ▶ Not eligible for Medicaid or receiving services ineligible under Medicaid; and
 - ▶ Whose household income is less than 150% of the federal poverty income guidelines
- ▶ Nominal Co-payments
 - ▶ Outpatient treatment services = \$3 per day
 - ▶ Residential treatment services = \$2 per day
- ▶ Subcontractors shall require individuals meeting provisions in F.S. 409.212 must contribute to their treatment costs.
- ▶ Nothing in 65E-14.018 or CFCHS policy shall prevent a service provider from further discounting or writing off charges individually or in the aggregate.
 - ▶ CFCHS will not pay the difference between an accelerated discount and the co-payment required per the sliding fee.
 - ▶ CFCHS will not be liable for bad debt (charges owed by a client but not paid by a client)

Fee Liability Exceptions

- ▶ Parents of minor clients, where client is permanently committed to DCF and parental rights have been permanently terminated.
- ▶ Parents of a minor child, when the child has requested and is receiving services without parental consent.
 - ▶ Parent engagement is an important element in the health of the entire family. Subcontractors must make every reasonable effort, within the constraints of law, to obtain parental consent.
 - ▶ CFCHS may deny payment for services (or recoup dollars for services already paid) when reasonable effort to obtain parental consent cannot be demonstrated to the satisfaction of CFCHS.



Uniform Schedule of Discounts

Table 7.1

Uniform Discounts	
Percent of Poverty Level	Standard Discount Percentage (Applied to Usual and Customary Charges)
0% to 149%	Nominal Co-pay
150% to 165%	96%
166% to 180%	94%
181% to 195%	89%
196% to 210%	81%
211% to 225%	70%
226% to 240%	56%
241% to 255%	39%
256% to 270%	19%
271% to 285%	10%
286% to 300%	5%
301% and above	0%

- ▶ “Percent of Poverty Level” shall be calculated using the Dept. of Health and Human Services Poverty Guidelines.
- ▶ These guidelines establish poverty income levels for various family sizes.

Household Income = Percent of Poverty Level

Poverty Guideline

Uniform Schedule of Discounts

2015 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES & THE DISTRICT OF COLUMBIA	
Persons in family/household	Poverty guideline
For families/households with more than 8 persons, add \$4,060 for each additional person.	
1	\$11,770
2	15,930
3	20,090
4	24,250
5	28,410
6	32,570
7	36,730
8	40,890

- ▶ “Percent of Poverty Level” shall be calculated using the Dept. of Health and Human Services Poverty Guidelines.
- ▶ These guidelines establish poverty income levels for various family sizes.
$$\frac{\text{Household Income}}{\text{Poverty Guideline}} = \text{Percent of Poverty Level}$$
- ▶ I.e. Family of 2 making \$45,000 before taxes annually
$$\frac{\$45,000}{\$15,930} = 282\%$$

This equates to 10% from usual and customary charges.

Reporting of Sliding Fee

Agency: ABC Agency Orlando, FL										
Activity 502018 Rec & Resiliency	July	August	January	June	Grand Total Paid	Contracted	Difference	Slide Co-pays	Grand Total Paid Net of Co-Pay	Burn Rate
Outpatient	\$ 200.00	\$ 200.00	\$ 200.00		\$ 1,400.00	\$ 5,000.00	\$ 3,600.00			
Sub Total	\$ 200.00	\$ 200.00	\$ 200.00	\$ -	\$ 1,400.00	\$ 5,000.00	\$ 3,600.00			
GRAND TOTAL	\$ 200.00	\$ 200.00	\$ 200.00	\$ -	\$ 1,400.00	\$ 5,000.00	\$ 3,600.00			

- ▶ Providers will self-report and attest the monthly slide fees on the burn rate sheet the following month they were accounted for.
- ▶ Revised burn rate sheets will be sent for February and CFCHS requests that all providers self report YTD.

Compliance

- ▶ Sliding Fees and Nominal Co-Pays owed to the Subcontractor by the individual being served shall not be reimbursed by CFCBS.
- ▶ If the Subcontractor chooses to apply accelerated discounts, the accelerated discount shall not be reimbursed by CFCBS.
- ▶ Accuracy of the Subcontractor reported sliding fees shall be confirmed by monitoring activities.

QUESTIONS



CONTACT INFORMATION

**FOR ANY FURTHER QUESTIONS PLEASE CONTACT
YOUR CONTRACT MANAGER**

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