

## Partners HealthCare Uninsured Patient Discount Policy

### **OVERVIEW:**

Partners HealthCare System (PHS) affiliated entities are tax-exempt entities, whose underlying mission is to provide services to all in need of medical care. Patients requiring urgent or emergent services shall not be denied those services based on their inability to pay. It is important to recognize, however, that Partners HealthCare affiliated entities have limited resources, and that to provide high quality services and continue to support community needs, each entity has a responsibility to seek prompt payment for services provided.

Partners HealthCare System affiliated entities recognize that some patients have limited means and may not have access to insurance coverage for all services. This discount policy has been developed to assist uninsured patients.

### **GENERAL PROVISIONS:**

1. **Scope.** This policy applies to the following Partners HealthCare entities:
  - a. Massachusetts General Hospital
  - b. Brigham & Women's Hospital
  - c. North Shore Medical Center
  - d. Newton-Wellesley Hospital
  - e. Brigham and Women's Faulkner Hospital
  - f. Martha's Vineyard Hospital
  - g. Nantucket Cottage Hospital
  - h. Massachusetts General Physicians Organization (MGPO)
  - i. Brigham and Women's Physicians Organization (BWPO)
  - j. North Shore Physicians Group (NSPG)
  - k. Newton-Wellesley Ambulatory Services (NWAS)

Note that physicians associated with these entities, but who bill "privately" are encouraged, but not required, to follow this policy.

2. **Existing Discounts.** This policy is intended to establish a common uninsured patient discount policy for Partners acute hospitals and their associated physician groups. Entities may continue existing discounts that go beyond this policy only with the approval of the local entity CFO.
3. **Uninsured Patients.** This policy is intended to apply to patients that do not have health insurance from either a public (e.g., Medicaid, Medicare) or private (e.g., Tufts, Harvard Pilgrim, Blue Cross, etc.) source. Included are:
  - a. Patients with no health insurance;
  - b. Patients whose only "insurance" is the Massachusetts Health Care Safety Net;
  - c. Patients whose balance results from having "exhausted" benefits under their insurance plan; and,
  - d. Patients whose balance results from "non-covered" services where insurance has determined that the patient is fully responsible for the charges associated with certain excluded services. This includes services where the insurer denied coverage due to the insurer's network limitations.

4. Income Limitations. This program is inclusive of patients at all income levels.
5. Patient Responsibilities. The patient has a number of responsibilities to meet in order to qualify for this discount program, including:
  - a. Obligation to obtain insurance coverage if affordable coverage is available to them;
  - b. Obligation to apply for any government sponsored insurance programs that they may qualify for;
  - c. Obligation to keep Partners HealthCare System entities apprised of current demographic and insurance information; and,
  - d. Obligation to pay all balances in accordance with agreed to time frames.
6. Uninsured Patient Discount. All uninsured patients that meet the other conditions of this policy are eligible for a discount on both hospital and physician bills of up to 25% if payment is received, or a payment plan agreed to, within 60 days of initial billing. Generally, for Elective services, payment should be made, or a payment plan agreed to, prior to service delivery. Should actual charges exceed the estimate, the patient must pay any additional amount owed within 60 days of initial bill. If additional charges are not paid in a timely manner, the entire discount agreement may be reversed and the patient billed for full charges. For emergent services, payment must be made, or a payment plan agreed to, within 60 days of initial bill. In order to take advantage of this general discount, a patient must be current on all outstanding balances. Note that this provision does not apply to physicians who bill "privately" rather than through one of the physician groups specified in the Scope section of this policy. Patient co-payments, co-insurance and insurance deductibles are specifically excluded from the General Discount.
7. Payment Requirement & Payment Plans. Discounts offered under this policy are contingent on full payment of the agreed amount and generally will not be applied to account balances until the agreed amount has been paid in full. Payment plans will be offered to all patients according to existing guidelines in the Partners Credit & Collection Policy.
8. Exclusions. Discounts under this policy do not apply to cosmetic surgery, infertility services, motor vehicle claims, third party liability claims, fixed fee services, other non-medically necessary services or services where other discounts have already been included in the charge.