Hebrew Rehabilitation Center Financial Assistance Policy

Hebrew Rehabilitation Center (HRC)’s Financial Assistance Policy (FAP) is intended to comply with state and federal law and regulations in performing the functions outlined in the policy. HRC updates its FAP whenever there are significant changes in state and federal regulations and will present those changes to its Board of Directors or to an entity/individual authorized by the Board to review/approve the FAP. When future coverage options are developed, as a result of federal and state healthcare reform proposals, HRC will make appropriate changes to this FAP.

HRC will help uninsured and underinsured individuals apply for health coverage through a public assistance program including but not limited to MassHealth or HRC’s financial assistance program, and work with individuals to enroll as appropriate. Assistance for these programs is determined by reviewing, among other items, an individual’s household income, assets, family size and all expenses.

While HRC assists patients in obtaining health coverage through public programs and financial assistance through other sources whenever appropriate including HRC, HRC may also be required to appropriately bill for and collect specific payments, which may include but not be limited to, applicable co-payments, deductibles, deposits, and other amounts for which the patient agrees to be responsible. When registering for services or if receiving a bill, HRC encourages patients to contact our staff to determine if they and/or a family member are in need of and eligible for financial assistance.

In working with patients to find available public assistance or coverage through HRC’s financial assistance, HRC does not discriminate on the basis of race, color, national origin, citizenship, alienage, religion, creed, sex, sexual orientation, gender identity, age, or disability in its policies or in its application of policies, concerning the acquisition and verification of financial information, preadmission or pretreatment deposits, payment plans, deferred or rejected admissions, determination that an individual qualifies for Low Income Patient status as determined by the Massachusetts MassHealth/Connector eligibility system, or attestation of information to determine Low Income patient status.

We understand that each individual has a unique financial situation. Every request for assistance is handled confidentially and requires the cooperation of the applicant. Information and assistance regarding eligibility for public assistance programs and/or coverage through HRC’s financial assistance program may be obtained by contacting HRC fiscal billing and collections team:

Hebrew Rehabilitation Center
1200 Centre Street
Boston, MA 02131
Attn: Fiscal Services

Fiscal Services: 617-971-5827
Also, information about this policy and HRC’s financial assistance program, including the application form and a plain language summary of the FAP, are available on HRC’s website:

Financial Assistance Application:
https://www.hebrewseniorlife.org/sites/default/files/2019-12/HRC_Financial_Assistance_Application_0.pdf

Financial Assistance Policy Plain Language Summary:

The actions that HRC may take in the event of nonpayment are described in HRC’s separate Billing and Collections Policy. Members of the public may obtain a free copy of the Billing and Collections Policy from HRC Fiscal Office or HRC website:

Billing and Collections Policy:

Coverage for Medically Necessary Health Care Services

HRC provides medically necessary health care services for all patients regardless of their ability to pay. Medically necessary services include services such as inpatient or outpatient health care services provided for the purpose of evaluation, diagnosis, and/or treatment of an injury or illness, as well as services typically defined by Medicare as “covered items or services”. HRC does not generally provide services that are viewed as emergency care. However, in the event that such care is provided, it will be provided without discrimination and regardless of whether an individual is eligible for financial assistance. HRC does not engage in activities that would discourage the seeking of emergency medical care. Coverage from a public, private, or hospital based financial assistance program may not apply to certain primary or elective procedures that are not reimbursable by such coverage options. If the patient is not sure if a service is not covered, they should contact HRC Fiscal office to determine what coverage options are available. The contact information is listed below.

Hebrew Rehabilitation Center
1200 Centre Street
Boston, MA  02131
Attn: Fiscal Services

Fiscal Services: 617-971-5827

Professional Medical Providers covered under the Financial Assistance Policy

All physicians, nurse practitioners and physician assistants practicing in the Hebrew Rehabilitation Center are covered under the HRC Financial Assistance Policy.
Public Assistance Programs and Hospital Financial Assistance

General Overview of Health Coverage and Financial Assistance Programs
Hospital patients may be eligible for free or reduced cost of health care services through various state public assistance programs as well as HRC’s Financial Assistance Program, including but not limited to MassHealth. Such programs are intended to assist low-income patients taking into account each individual’s ability to contribute to the cost of his or her care. For those individuals that are uninsured or underinsured, HRC will, when requested, help them with applying for either coverage through public assistance programs or hospital financial assistance programs that may cover all or some of their unpaid hospital bills.

HRC Additional Financial Assistance
HRC provides financial assistance for those patients, or the party responsible for payment, for medically necessary healthcare services, who meet its criteria as outlined below. This financial assistance is meant to supplement, and not replace, other coverage for services in order to ensure the financial assistance is provided when needed. Patients who are Massachusetts residents and/or in HRC’s service area may be required to complete their state’s application for Medicaid coverage or subsidized health insurance prior to seeking coverage through HRC’s own financial assistance options. HRC will not deny financial assistance under its FAP based on the applicant’s failure to provide information or documentation unless that missing information or documentation is described in, and necessary, for the determination of financial assistance through the application form. The application form can be found here:

Financial Assistance Application:
https://www.hebrewseniorlife.org/sites/default/files/2019-12/HRC_Financial_Assistance_Application_0.pdf

Discounts under this policy do not apply to services not normally covered by Medicare, or third party liability claims. Financial Assistance will be denied if a patient or patient’s responsible party/guarantor provides false information regarding his/her income, household size, assets, liabilities, expenses, or other resources available that might indicate a financial means to pay for services.

To qualify for HRC’s Financial Assistance program, in addition to the below mentioned criteria, the applicant needs to confirm that there is no source other than the responsible party which is legally responsible for the patient’s medical expenses, such as MassHealth, the Premium Assistance Payment Program operated by the state’s Health Connector, the Children’s Medical Security Plan or other agency.

Uninsured, or underinsured, applicants, who do not qualify for any public assistance programs, with a Federal Poverty Income Guidelines (FPIG) greater than or equal to 300% are offered a 25% prompt pay discount for medically necessary services. Since it is not means-tested, this is not considered financial assistance.

The Federal Poverty Income Guidelines (FPIG) are updated annually and are posted on the state’s website at http://www.mass.gov
For those Applicants above 300% FPIG, experiencing financial hardship a payment plan may be approved. The payment plan is as follows:

a. Balances of 0.00 to $500.00 can be budgeted over five months.
b. Balances from $500.00 to $1,000.00 can be budgeted over one year.
c. Balances from $1,000.00 to $2,500.0 can be budgeted over 18 months.
d. Balances greater than $2,500.0 must involve a review by the director and special arrangements can be determined.

For those Applicants below 300% FPIG, a 40% discount on charges will be provided.

Limitations on Charges

HRC will not charge any individual who is eligible for financial assistance under this policy for emergency and medically necessary care more than the Amount Generally Billed (“AGB”). The AGB is determined using the “look-back” method, which is calculated using the reimbursement rates for Medicare, MassHealth and commercial rates for a 12 month period, divided by the gross charges for those claims. The resulting percentage is multiplied by gross charges for all medically necessary care. The current AGB percentage is 66%.

Notices & Application for Hospital Financial Assistance and Public Assistance Programs

Notices of Available Hospital Financial Assistance & Public Assistance Options
For those individuals who are uninsured or underinsured, HRC will work with patients to assist them in applying for public assistance and/or hospital financial assistance programs that may cover some or all of their unpaid hospital bills. In order to help uninsured and underinsured individuals find available and appropriate options, HRC will provide all individuals with a general notice of the availability of public assistance and financial assistance programs during the patient’s initial admissions visit.

Application for Hospital Financial Assistance and Public Assistance Programs
HRC is available to assist patients in enrolling into a state public assistance program, in particular MassHealth.

For financial assistance provided through HRC, the applicant will be asked to provide:

Income:

- Government issued picture ID
- 2 consecutive pay stubs
- Award letter or other statements support other income
- Most recent federal tax return
Assets:
   - Current statements for each account (checking, savings, CD’s, stocks, mutual funds)

Expenses:
   - Medical expense statements
   - Housing expense statements
   - Evidence of extraordinary financial circumstances
   - Evidence of Medicaid denial

HRC will not deny financial assistance under its financial assistance policy for missing information or documentation unless the information or documentation is described as mandatory in its financial assistance policy or application form.

HRC will advise the patient of their obligation to provide HRC and the applicable state agency with accurate and timely information regarding their full name, address, telephone number, date of birth, social security number (if available), current insurance coverage options (including home, motor vehicle, and other liability insurance) that can cover the cost of the care received, any other applicable financial resources, and citizenship and residency information. This information will be submitted to the state as part of the application for public program assistance to determine coverage for the services provided to the individual.

When the individual contacts HRC, HRC will attempt to identify if an individual qualifies for a public assistance program or through HRC financial assistance program. An individual who is enrolled in a public assistance program may qualify for certain benefits. Individuals may also qualify for additional assistance based on HRC’s financial assistance program based on the individual’s documented income and allowable medical expenses.