Speare Memorial Hospital Plymouth, NH A Critical Access Hospital

DEPT: Administration

Title: NH Health Access Network

(Formally part of the Charity Care/Community Care Policy portable Financial Assistance)

Created: 7/22/2009 Reviewed: 12/2013, 12/2014, 12/2015, 5/31/2016 Revised: 12/2010, 12/2011, 12/2016, 7/2017

MRP: Director Revenue Cycle Services

POLICY

New Hampshire Access Network (NHHAN) is voluntarily provided to patients who are residents of New Hampshire, have active health insurance but are unable to pay for all or part of the costs of their healthcare. The NH Health Access Network is a group of hospitals, doctors, and other health care providers in New Hampshire that work together to help children and adults when they cannot afford the healthcare they need.

Determination of a person's residence is confirmed by their most current federal tax return, or New Hampshire driver's license. Speare Memorial Hospital's determination of this program's financial assistance eligibility is either made prospectively or retrospectively, but cannot include any balances already in bad debt. The evaluation process shall be conducted in a manner sufficient to identify the patient's ability to pay, and insurance status. NHHAN is applied uniformly to all persons regardless of race, color, natural origin, religion, sex, age, or handicap.

All employed/contracted providers of Speare Memorial Hospital and the Speare Physician Practices are covered by NHHAN and the Financial Assistance Policy.

PURPOSE

To establish procedures and guidelines for identifying and uniformly processing applications for the NHHAN Program for medically necessary services rendered in both Speare Memorial Hospital and Speare's Physician Practices.

DEFINITIONS

Urgent Care

An urgent care situation is an unexpected illness or injury that needs prompt medical attention - within a 24-hour period - but is not an immediate threat to one's health. Examples include headaches, back or joint pain, flu symptoms or ear aches. These are times when care is necessary but not critical. Medical conditions that are not an emergency should be treated in family physician offices or a contracting urgent care center.

Emergent Care

An emergent medical condition threatens life or limb, such as difficulty breathing, suspected heart attack, uncontrolled bleeding, unconsciousness or severe burns.

PROCEDURE

The Patient Financial Services Department will maintain the process that provides controls for the proper identification and evaluation of NHHAN applications. Determination of eligibility shall be based on the requirements that the services provided are emergent/urgent and medically <u>necessary</u>, and that the patient's family income meets the income guidelines indicated on the sliding scale chart (Attachment A), as well as a review of assets utilizing the NH Health Access Network guidelines (see Attachment C).

When a potential NHHAN applicant is identified, the Patient Financial Counselor shall provide a Speare Memorial Hospital / NH Health Access Network application to the patient or person requesting the application. If the applicant is unable to complete the application, the Patient Financial Counselor will assist in the completion of the application. The Patient Financial Counselor as per Attachment D's guidelines, will consider all household income, assets, all investments (protected or unprotected), and equity value in real property in the eligibility determination process. The Patient Financial Counselor shall review the application to make sure it is complete and includes a signed attestation stating that the information provided is complete and accurate. The Hospital reserves the right to verify the information provided by the applicant, and has the right to deny any application that is not signed, deemed to be incomplete, or inaccurately reflects the financial position of the applicant.

Determination of eligibility is granted on a sliding fee basis (see Attachment D). Once a determination of the eligibility has been made, the Patient Financial Counselor will notify the applicant in writing. Approvals will apply to services rendered and not in bad debt. The determination may extend out no more than 6 months following eligibility determination. The letter will also advise the applicant of the amount, if any, that they are responsible to pay.

The Director of Revenue Cycle Services will review and approve charity care applications. Adjustments greater than \$15,000 will be reported to the CFO for approval.

Approved

Chief Financial Officer

Date

President / Chief Executive Officer Date

Chairperson, Board of Directors

Date

	125%		6 FPL	150% FPL			175% FPL			200% FPL			
		I			vel 1 discount)		Lev (75% di	rel 2 scount)	Level 3 (50% discount)			Level 4 (25% discount)	
Family Size	100% FPL	QMBY	SLMBY	Monthly Income = to or <	Yearly Income =to or <		Monthly Income = to or <	Yearly Income =to or <	Monthly Income = to or <	Yearly Income =to or <		Monthly Income = to or <	Yearly Income =to or <
1	\$11,880	\$1,010	\$1,208	\$1,237.50	\$14,850.00		\$1,485.00	\$17,820.00	\$1,732.50	\$20,790.00		\$1,980.00	\$23,760.00
2	\$16,020	\$1,355	\$1,622	\$1,668.75	\$20,025.00		\$2,002.50	\$24,030.00	\$2,336.25	\$28,035.00		\$2,670.00	\$32,040.00
3	\$20,160	\$ -	\$ -	\$2,100.00	\$25,200.00		\$2,520.00	\$30,240.00	\$2,940.00	\$35,280.00		\$3,360.00	\$40,320.00
4	\$24,300	\$ -	\$ -	\$2,531.25	\$30,375.00		\$3,037.50	\$36,450.00	\$3,543.75	\$42,525.00		\$4,050.00	\$48,600.00
5	\$28,440	\$ -	\$ -	\$2,962.50	\$35,550.00		\$3,555.00	\$42,660.00	\$4,147.50	\$49,770.00		\$4,740.00	\$56,880.00
6	\$32,580	\$ -	\$ -	\$3,393.75	\$40,725.00		\$4,072.50	\$48,870.00	\$4,751.25	\$57,015.00		\$5,430.00	\$65,160.00
7	\$36,730	\$ -	\$	\$3,826.04	\$45,912.50		\$4,591.25	\$55,095.00	\$5,356.46	\$64,277.50		\$6,121.67	\$73,460.00
8	\$40,890	\$ -	\$ -	\$4,259.38	\$51,112.50		\$5,111.25	\$61,335.00	\$5,963.13	\$71,557.50		\$6,815.00	\$81,780.00
9	\$45,050	\$ -	\$ -	\$4,692.71	\$56,312.50		\$5,631.25	\$67,575.00	\$6,569.79	\$78,837.50		\$7,508.33	\$90,100.00
10	\$49,210	\$ -	\$ -	\$5,126.04	\$61,512.50		\$6,151.25	\$73,815.00	\$7,176.46	\$86,117.50		\$8,201.67	\$98,420.00
	Each Add	'l Person A	Add \$4,160.	00									

EXHIBIT A 2016 NHHAN Guidelines (effective 4/1/16 - 3/30/17)

Updated: March 10, 2016

EXHIBIT B MINIMUM PAYMENT AND CO-PAYMENT GUIDELINES

Patient balances are the patient's responsibility as determined on the following sliding scales:

FEDERAL POVERTY INCOME GUIDELINES	0 to 125%	126% to 150%	151% to 175%	176% to 200%	201% to 225%
NH Health Access Network	1	2	3	4	
NH Health Access Network	100%	75%	50%	25%	
Speers Memorial Hagnital	А		В	С	D
Speare Memorial Hospital	10	0%	75%	50%	25%

HOSPITAL OUTPATIENT & PHYSICIAN PRACTICES VISIT FEE:*

FEDERAL POVERTY INCOME GUIDELINES	0 to 125%	126% to 150%	151% to 175%	176% to 200%	201% to 225%
Emergency Room Visit	\$40	\$50	\$70	\$100	\$130
Rehabilitation Service	\$5	\$5	\$15	\$20	\$20
Primary Care Physician Office Visit	\$20	\$20	\$20	\$20	\$20
Specialty Care Physician Office Visit	\$30	\$30	\$60	\$90	\$120

* Service fee is expected at time of service and excludes procedures/injections/infusions. Any overdue unpaid patient balances at the time of NHHAN application renewal could result in discontinuation of eligibility. Please see Attachment B for Optical Services.

PROCEDURES SLIDING SCALE:

Surgery, Anesthesia, and other procedures (this discount applies to professional services only)	80%	80%	60%	40%	30%
Elective Surgery, Anesthesia, and other procedures (this discount applies to professional services only). **	60%		50%	40%	30%

** Devices and injectable need to be paid in full prior to surgery. Please see Attachment B for Optical Services

ATTACHMENT C PROCEDURE FOR PROCESSING NH HEALTH ACCESS NETWORK (NHHAN) APPLICATIONS

Any new application processors are required to complete and pass the NHHAN test to process NHHAN decisions.

1. Introduction

NHHAN applications may be provided to any NH resident with health insurance who seeks financial assistance from a healthcare provider. While the NHHAN application can be used for all individuals applying for financial assistance; however, portability to other providers is limited to those individuals who have health insurance and meet established criteria.

NHHAN financial assistance is intended for individuals who have insurance and are in households whose monthly income or assets fall within established NHHAN Network guidelines. A sliding fee schedule will be used to qualify households based on income levels up to 200% of the Federal

Poverty Level (FPL). The sliding fee schedule will be updated every April 1st and will be calculated using the most recent FPL limits. Financial assistance for uninsured individuals will be determined by the provider and is not portable.

2. The Application

The application packet consists of a cover letter and a two-page application.

The application covers all household members. It is the vision of the NHHAN Network that all participating providers will use the NHHAN application.

If it has taken longer than 90 days to process an application, recent proof of income (pay stubs, bank statements, etc.) should be requested prior to issuing a NHHAN card.

Note: Other than the provider logo, the NHHAN application is not to be altered or changed. If a provider has additional questions for individual consideration, a separate page should be used.

3. Documenting NHHAN applications sent or received

The issuing and receiving of applications should be documented according to established provider guidelines. Individuals should be registered and identified according to the individual provider's normal registration and identification procedures.

The NHHAN Network reserves the right to periodically ask for unidentified information to be gathered by surveys for reporting purposes.

4. Required financial documentation

The following documentation (when applicable) must accompany an application to be considered a portable decision under the NH HAN, including but not all inclusive of the following:

- Complete copy of the most recent Federal Income Tax Return and all schedules.
- Copies of most recent W-2 forms
- Copies of the three (3) most recent, paycheck stubs or a statement from the employer. Minimum of one most recent pay stub if all other documentation is complete.
- Copies of three (3) most recent bank statements (e.g., savings, checking, certificates of deposit, money market, IRA, 401K, etc.) Minimum of 1 statement from each within the last 30 days if all other documentation if complete. ALL PAGES

- Copies of unemployment, disability or workers compensation benefits statements
- Copies of pension benefits stubs
- Copies of social security income (yearly benefits statements, copy of check or direct deposit)
- Copy of Food Stamp allocation
- Copies of gov't assistance notices (including Department of Health & Human Services and Medicaid Spend Down Letter)
- Copies of Denial Notices from Medicaid, including Premium Assistance Plan
- Copies of financial subsidies notices from Marketplace

5. How to count household members

A household consists of members in the household who have a legal union (blood, marriage, adoption), as well as unmarried parents of a shared child or children.

A household member is:

• The patient or individual

Marriage = Man & Woman OR = Same Sex Couple

- A spouseA dependent child
- Unmarried couples with a mutual child dependent living under the same roof.
- Parents claimed on adult child's tax return

When the applicant is claimed as a dependent on any household member's tax return, that household member(s) income must be counted, regardless of whether or not there is a blood, legal or shared child relationship. An exception is when a child who was claimed as a dependent on their parents' tax return the previous year moves out after graduation and sets up their own household. In that case, the child may be counted as a household of one pending the next year's tax return (Independent Child). Becoming an independent child – an independent child is one that is no longer claimed on another person's tax return and will file independently for tax purposes.

In the case of pregnancy, the fetus is not counted as a household member until birth. In the case of an unwed couple expecting a child, they are not considered a household until after the baby is born.

A civil union is recognized as a 2-person household for the purpose of establishing family size and income of a household. Civil union is established under state law and is not recognized for Federal income tax purposes; therefore, in order to document the status of civil union partners, a certificate of civil union is required to complete a NHHAN application.

In the case of divorced parents with dependent children, household size is determined by who counts the children as dependents. For example, when both parents have joint custody, household size is determined by who counts the child (ren) as a dependent on the most current tax return.

An applicant stating that he/she is "separated" must show proof of either 1) a court-documented legal separation, or 2) legal documentation of a restraining order or domestic violence protection. Otherwise, the spouses are still considered a household and both incomes need to be considered.

In the case of applicants who earn income by caring for disabled adults in their homes, NHHAN will count the disabled adults as household members. In order to be consistent, NHHAN will count foster children as household members.

6. NH Residency Requirements

NH permanent residency is required, but not citizenship. Proof of residency can be provided in several different ways: driver's license, utility bills, pay stubs, letter from landlord, etc. If the individual/family is new to the state and temporarily living within another household, and unable to provide any other proof of residency, the head of household may write a letter indicating how long the individual/family has been there and how long they intend to stay. Individuals that are only here temporarily are not considered residents and should not be given a NHHAN card.

When determining NH residency for adult students from outside of the country, a student visa implies temporary residency and is not eligible for NHHAN; a green card denotes permanent residency and is eligible for NHHAN.

When determining NH residency for out-of-state students, check the address on the applicant's most recent tax return and driver's license.

In cases where applicants have two residences in different states (for example, they may live with adult children in another state for part of the year), use the address on the applicant's income tax return as the permanent residence. If the applicant does not file an income tax, use the address on the driver's license and auto registration. The primary residence must be NH in order to qualify for NHHAN.

Refugees and asylees are considered permanent residents. Applicants who are in the midst of applying for asylees status are not considered permanent residents until their asylee status has been confirmed. NHHAN eligible if they have health insurance, if they do not have insurance it is up to the discretion of the hospital and/or facility.

7. Definition of Household Income

Household income is the total combined income during the past 12 months of all members of the household, as described above, who share financial responsibility in a household. This includes money from jobs, net income from business, farm or rent, pensions, dividends, interest, social security payments and any other income received by members of the household.

Household income is based on all sources of income received into the home. Income includes assets such as, but not limited to: savings, alimony, certificates of deposit, IRA's, stocks, bonds, 401ks, mutual funds, equity in the primary residence greater than \$100,000 and second properties. When dividends are noted on a tax return, the source of the dividends should be requested along with a recent market value statement.

The income received for caring for foster children is added to household income; the same pertains for the care of disabled adults living in the applicant's home. (Not required on Federal Tax Return)

Social Security survivor benefits for minor children should be included in the household income.

Note: Be careful not to double-count an applicant's income. When computing the value of the applicant's checking account, be sure to allow for pay checks that have been deposited, but have already been counted as salary.

An applicant who does not file an income tax return needs to complete a Form 4506T (verification of non-filing) and the site should wait for the return letter from the IRS prior to issuing a NHHAN card. Other proof of income, such as pay stubs, verification from the employer, etc. can be used to determine NHHAN eligibility. An applicant who does not file an income tax return and is unable to complete a Form 4506T (for example, an undocumented resident) and is unable to provide any

verification of income, can complete a "Self-Declaration Form" form and/or a "No Income/Support Verification" form, both of which should be notarized.

<u>Income tax extension</u>: The applicant should include a copy of the extension with the application, and a NHHAN card should not be issued until the final tax return is filed. NHHAN applications submitted after March 1st should include income tax returns for the immediate past year.

When adult children count their elderly parents as dependents on their income taxes, we count the elderly parents' pension and retirement in the same way that we count other household members' pensions and retirement. If the adult children have gone to the effort of claiming their parents' on their tax return, they will most likely benefit from these accounts in the future. We do not count dependent children's savings accounts.

Income from a home equity loan is added to income & assets, but the amount of the loan is also counted as a mortgage when calculating home equity.

Credit card advances are not counted as income since they need to be repaid. The value of food stamps, fuel assistance, electricity assistance, etc. is not counted as income because none of these can be used to pay medical bills.

Income that exceeds \$600 from sites such as Craig's List, EBay or other sources needs to be listed under "Other Income" on Line 21 of the 1040 tax return.

When the profit from the sale of one house is used toward the purchase of another house, that money is not counted as income because it will already be counted elsewhere, e.g. on the tax return or the savings account or the home equity. "Building accounts" are not to be counted as income because that money is earmarked specifically for building the new home and cannot be used for other purposes.

We do not count a full-time student's income if that student is claimed as a dependent on their parent's tax return. If the parents do not claim the student as a dependent, the student should be filing a tax return and their income is counted accordingly (independent child).

Applications that list a business as an LLC can be processed for NHHAN if they use a Schedule C. Process the Schedule C as usual. However, if the applicant is using a Schedule K, those applications cannot be processed for NHHAN. Schedule K's are quite complicated and are best left to in-house decisions only.

The face value of a life insurance policy is not considered an asset. It would only be counted as an asset when the policy is cashed in.

8. Sheltered Assets

Each household is allowed the following sheltered assets, which are not to be used when calculating household income or assets.

Savings, certificates of deposit and checking: up to \$5,000 per person/\$10,000 per family **Equity in primary residence** up to \$100,000 (\$150,000 for applicants aged 55 or older).

The combined totals of assets above the sheltered amounts must be added to gross income to determine portability of the decision.

9. Property

<u>Second property</u>: Individuals with second property may be eligible for NHHAN if they meet the income/assets eligibility. The primary home is sheltered as normal after deducting the remaining mortgage from the home value. The second property is NOT sheltered i.e. the entire value of the property (building and land) minus the remaining mortgage is added to the applicant's assets. This is done for each piece of additional property owned by the applicant. (Note: This policy pertains to all second properties, i.e. rental property, self-employed worksite property, second homes, etc.)

<u>Time shares</u>: Only time shares that are completely paid for have any equity. Applicants with time shares should include a current statement on the loan status, indicating when the loan will be paid up. Once the applicant owns the time share, its equity is counted as a second property.

<u>Reverse mortgage</u>: When calculating income/assets for a household with a reverse mortgage, the payments that have been distributed from the reverse mortgage should be deducted from the home equity. The income from the reverse mortgage should be included in the tax return.

<u>Foreclosure or lien</u>: We continue to count the full equity of the property, regardless of a lien or foreclosure, as long as the applicant maintains the property.

<u>Joint ownership</u>: When an applicant owns property with another individual who is not part of the applicant's household, the financial assistance counselor should ask to see a copy of the deed in order to determine how much equity to assign the applicant. In cases of joint ownership of property, fifty percent of the equity is assigned to the applicant. (Bank accounts, however, are treated differently. One hundred percent of the value of joint bank accounts is assigned to the applicant, no matter whom they share the account with.)

Verification of property value is only required for second property. It's up to the discretion of each site to look up the value of the primary home. There are websites available to do this, such as www.visionappraisal.com. If the applicant's town doesn't participate on the website, you can contact the town clerk's office directly.

Rental Property:

- When an applicant rents space in their primary home, the entire rental income is counted as income. No expense deductions are allowed.
- When an applicant has rental property outside of their primary home, (1) the equity of the property is treated as second property, i.e. none of the equity is sheltered and (2) a Schedule E (Supplemental Income) should be submitted. Lines #5 (advertising), #6 (auto & travel), and #20 (depreciation) are added back in to the income.

10. How to calculate gross monthly income

To ensure all providers calculate income the same way, income calculations are based on gross income. The following guidelines should be used when calculating monthly income:

- To calculate monthly gross income: Take average weekly gross income – multiplied by 52 – divided by 12 Take average bi-weekly gross income – multiplied by 26 – divided by 12 Add back any amounts above the sheltered limits.
- To calculate yearly gross income: Take average weekly gross income – multiplied by 52 Take average bi-weekly gross income – multiplied by 26

Add back any amounts above the sheltered limits.

• Self-employment

Refer to self-employment flow and calculations for determining monthly/yearly income.

Calculate the household income. Determine the number of household members. Using the calculated figure and household size, determine if the household falls within the current sliding income schedule of 125% - 200% of FPL. Total income plus defined assets and household size is the sole basis of approval for the NH HAN applicants.

Determine the level of approval:

100% reduction – Gross monthly or yearly income is between0 % and 125% or FPL75% reduction – Gross monthly or yearly income is between126 % and 150% or FPL50% reduction – Gross monthly or yearly income is between151 % and 175% of FPL25% reduction – Gross monthly or yearly income is between176 % and 200% of FPL

The Federal Poverty Guidelines can be viewed at the following site: <u>http://aspe.hhs.gov/poverty</u>

Households with monthly income exceeding 200% do not qualify for assistance through the NHHAN. Individual provider approvals may be granted according to the providers established guidelines. Individual provider decisions are not portable under the NHHAN program.

NOTE: Remember to always add assets above sheltered amount to gross income. Gross income calculations are to be based on the current household income. The tax return is only to be used to verify variances and identify interest income and self-employment.

10A. Special circumstances in determining household income

- a. Seasonal employment: Annual income should be determined by adding the total income of the past 12 months. Use most recent tax return.
- b. Unemployment: If an individual has been unemployed for less than 3 months, eligibility determination should be made according to the previous year's income tax return. If an individual has been unemployed for 3 months or more, one of the following documents should be provided copy of unemployment check, separation of letter from employer, medical documentation of inability to work, or proof of recent incarceration and eligibility should be based on the individual's current financial circumstances. However, in cases where an individual has not been unemployed for 3 <u>consecutive</u> months, i.e. has had sporadic work/unemployed episodes, that individual should not be given a NHHAN card until they fit into one of the above established policies. Institution-only assistance can be granted at the institution's discretion.
- c.
- d. New job: Income should be projected out for 12 months based on the new income.
- e. Newly self-employed: In cases where an individual is newly self-employed and does not have a Schedule C from the previous year, a detailed income statement from an accountant should be provided or a detailed gross income and business expense report. If the applicant is unable to provide either of these, portability should be refused until the first Schedule C can be filed and reviewed.

11. Public assistance programs

All individuals are required to apply for applicable public assistance programs. Failure to submit required documents does not constitute a Medicaid denial. Decisions are not portable if a public

assistance application is pending. Applicants in the midst of a Medicaid appeal are not eligible for NHHAN until the appeal process has been completed. Individuals eligible for or in the Medicaid Spend Down program or expanded Medicaid program (Premium Assistance Program) are not eligible for NHHAN.

Individuals who choose not to enroll in Medicare Part B or expanded Medicaid program (Premium Assistance Program) are not eligible for NHHAN.

Individuals who are eligible for SLMB-135 can either enroll in SLMB-135 and have their Part B premiums paid, or they can be on the Medicaid Spend Down program. If they choose to enroll in SLMB-135, they are still eligible to apply for NHHAN.

Applicants that are eligible for Victims of Crime (VC) compensation will not be eligible for NHHAN until their \$10,000 VC compensation has been exhausted. Be aware that VC compensation funds are also used for housing, medications, and counseling. Reimbursement from VC won't be received until all of these, plus all medical treatment, has been completed.

Applicants that are on a waiting list for care at a VA hospital should be given institution-only assistance, rather than a NHHAN card, pending their care at the VA hospital.

12. Sources of payment

All sources of payment on account: medical insurance, public assistance, liability, workers compensation, auto with medical payment or any other potential sources must be exhausted before any financial assistance will be awarded.

13. Determining portability

Network portability means that any provider who participates in the NH Health Access Network agrees to abide by the decision of the issuing provider. All providers have agreed to follow consistent and documented procedures for determining NHHAN Network eligibility based on established guidelines and having health insurance. The guidelines for processing NHHAN Network applications cannot be changed or altered without the consent of the Administration and Training core group.

Refer to portability flowchart for red flag triggers and to determine portability.

It's best to use the credit report to verify information on the application. If information comes to a counselor by another means, and this information is not noted on the credit report, notify applicant that "By personal knowledge, it has come to our attention that...." but be sure that you have your facts first.

14. Notifying applicants/households of NH HAN acceptance or denial

A written decision will be sent to each individual who applies for assistance. The verbiage for NHHAN Network approvals or denials will be the same for all providers. Verbiage identifying inhouse acceptance can be determined by the individual provider.

NHHAN Approval Letter: Approved for Provider and NHHAN

The following information cannot be changed or altered:

It is also been determined that you qualify for assistance through the NH Health Access Network. The NH Health Access Network is a network of hospitals and other health care

providers that work to improve access to health care for insured children and adult residents of the State of New Hampshire. You qualify for a minimum of $<__>$ % at any participating NHHAN Network provider that accepts your insurance. This determination is based on Federal Poverty Guideline Limits.

An identification card with your eligibility limits is enclosed. You must present this card along with any and all insurance cards to a participating provider to receive assistance with their bills. This is the only copy of this card you will receive. Please inquire at other providers prior to service regarding their participation in the NH Access Network.

The NHHAN determination is good for six months and the determination will be valid until last day of the month.

If all household members are on long term fixed incomes, such as social security or disability, the decision should be approved for one year.

Approvals that are for less than 6 months due to changing income status are not portable. Institution-only Approval Letter: Approved for Provider/Organized and denied NHHAN

The following information cannot be changed or altered:

Unfortunately, you do not qualify for assistance through the NH Health Access Network because your income or assets exceed the criteria limits established by the NHHAN Network or you have insurance that is not accepted by this hospital and/or facility.

15. Approval Identification Cards

Until a plastic card is available with all participating providers, the provider's business card is to be used. A sticker (template file will be provided – Avery 5163) is to be placed on the back of the business card with the following information, which may not be altered for consistent training identification:

Name:	 D	OB:	
End Date:	L	evel:	
Issuing Org:			
Telephone No. & Ext:			
Authorized Signature:			
*Name of Insurance: _			

Even though the provider and phone number is listed on the front of the card, the information should be re-entered on the back. This information is needed by other providers accepting the individual under the NHHAN and allows for consistent and uniformed training of registration staff.

One card with the appropriate information should be completed for each household member. Multiple household members are not to be listed on an individual card.

Cards must be laminated to ensure information is not altered or changed. Staff registering individuals with this card must be trained not to accept the card if the information is altered or changed.

16. When is it acceptable to request a copy of a completed application?

A provider may ask for a copy of an application if the balance of the total household write off exceeds \$25,000. Copies of application may also be requested for Medicare or Medicaid cost report audits. Sites are not obliged to exchange information if the applicant was approved for institution-only assistance.

The premise of the NHHAN Network is trust and consistency of processing requests for assistance. If any provider feels the need to verify the information on a card an individual presents, the receiving provider may contact the issuing provider for verification. These contacts should be limited to the situations described and not intended for verification each time an individual presents for service.

17. Appeals

Every applicant has the right to appeal a decision to deny assistance through NHHAN program. These appeals should be made in writing to the issuing health care provider. If the household exceeds the established criteria, the provider may accept the individual for financial assistance; however, these decisions are not portable and any approvals are based on individual provider guidelines.

18. Non-covered services:

The following services are not eligible for assistance by the NHHAN Network:

- Cosmetic procedures
- Infertility Services
- All other non-covered services are "as determined by the service provider"

19. Signatures of approval:

Appropriate signatures for approval are subject to individual authority limits of the approving provider.

Revised: 4/27/05, 2/6/06, 9/22/08, 5/12/09, 9/01/09, 4/21/10, 10/25/10, 11/3/10, 3/23/11, 11/2/11, 2/27/12, 7/23/12, 5/2/2013, 7/29/2015

ATTACHMENT D

2015 FEDERAL POVERTY GUIDELINES

Family Size	100%	120%	133%	135%	150%	175%	185%	200%	250%
1	11,770	14,124	15,654	15,890	17,655	20,598	21,775	23,540	29,425
2	15,930	19,116	21,187	21,506	23,895	27,878	29,471	31,860	39,825
3	20,090	24,108	26,720	27,122	30,135	35,158	37,167	40,180	50,225
4	24,250	29,100	32,253	32,738	36,375	42,438	44,863	48,500	60,625
5	28,410	34,092	37,785	38,354	42,615	49,718	52,559	56,820	71,025
6	32,570	39,084	43,318	43,970	48,855	56,998	60,255	65,140	81,425
7	36,730	44,076	48,851	49,586	55,095	64,278	67,951	73,460	91,825
8	40,890	49,068	54,384	55,202	61,335	71,558	75,647	81,780	102,225

ALL STATES (EXCEPT ALASKA AND HAWAII) AND D.C.

For family units of more than 8 members, add <u>\$4,160</u> for each additional member.

SPEARE COMMUNITY CARE GUIDELINE EFFECTIVE APRIL 1, 2015

Category	А	В	С	D	
Discount	95%	75%	50%	25%	
Family Size					
1	17,655	20,598	23,540	26,483	29,425
2	23,895	27,878	31,860	35,843	39,825
3	30,135	35,158	40,180	45,203	50,225
4	36,375	42,438	48,500	54,563	60,625
5	42,615	49,718	56,820	63,923	71,025
6	48,855	56,998	65,140	73,283	81,425
7	55,095	64,278	73,460	82,643	91,825
8	61,335	71,558	81,780	92,003	102,225
Each Add 'l	6,240	7,280	8,320	9,3	360

NH HEALTH ACCESS GUIDELINE EFFECTIVE APRIL 1, 2015

Level	1	2	3	4
DISCOUNT	100%	75%	50%	25%
Family Size				
1	14,713	17,655	20,598	23,540
2	19,913	23,895	27,878	31,860
3	25,113	30,135	35,158	40,180
4	30,313	36,375	42,438	48,500
5	35,513	42,615	49,718	56,820
6	40,713	48,855	56,998	65,140
7	45,913	55,095	64,278	73,460
8	51,113	61,335	71,558	81,780
Each Add 'l	5,200	6,456	7,444	8,320