



<p>District of Columbia Department of Health Ryan White Care and Treatment Division Policy:</p> <p>Imposition of Charges and Sliding Fee Scale</p>		<p>Policies and Procedures Implementing office: HAHSTA Care and Treatment Division Ryan White HIV/AIDS Program</p> <p>Training required: Yes.</p> <p>Originally Issued: March 10, 2022</p> <p>Revised/Reviewed: 9/14/23</p>
<p>Program Approval:</p>  <p>_____ Ebony Fortune Ryan White Program Manager</p>	<p>Recipient Authorization:</p>  <p>_____ Avemaria Smith Ryan White Recipient</p>	<p>Effective Date: March 10, 2022</p> <p>Valid Through Date: September 30, 2024</p>
<p>I. SUBJECT</p> <p>Program Policy on Sliding Fee Scale, Imposition & Cap on Charges</p>		
<p>II. PURPOSE -</p> <p>This policy provides guidance on imposition, and cap on charges, and sliding fee scale for Ryan White Programs supported, whole or in part, by Ryan White Part A and B funding.</p>		
<p>III. Definitions and Acronyms</p>	<p>Annual Gross Income - Is the income level to which customers will be assessed for the purposes of imposition of charges. Sub-recipients may select from the following two methods of determining an individual's Annual Gross Income:</p> <ul style="list-style-type: none"> • Annual Gross Income: the total amount of income earned from all sources during the calendar year before taxes. • Adjusted Gross Income: annual gross income less deductions. <p>Applicable Services - Any RWHAP service with a distinct fee typically charged in the local market. In the broader healthcare community this distinct fee is often referred to as a usual, customary, and reasonable (UCR) fee.</p> <p>Billable services - Services for which there is a payer source.</p>	

Cap on Charges - The limitation on aggregate charges that may be imposed on a customer during the calendar year based on the customer's annual gross income. All fees must be waived once a RWHAP customer reaches their cap for that calendar year.

Charges - The fees imposed upon customers for the delivery of billable services.

Costs - The accrued expenditures incurred by the recipient /sub-recipient during a given period requiring the provision of funds for:

(1) goods and other tangible property received.

(2) services performed by employees, contractors, sub-recipient, sub-contractors, and other payees

Customer – A person living with HIV/AIDS who is uninsured or under-insured and meets the eligibility criteria as defined by the Eligible Metropolitan Area (EMA) or jurisdiction in which services are sought. For specifics on eligibility criteria, refer to the Ryan White Enrollment and Eligibility policy.

Federal Poverty Level (FPL) - A measure of income issued every year by Health and Human Services (HHS). Federal poverty levels are commonly used to determine eligibility for certain programs and benefits such as Medicaid, Food Stamps, the Children's Health Insurance Program (CHIP), and RWHAP.

Imposition of Charges - The imposition of charges requirement is a term used to describe all activities, policies, and procedures related to assessing RWHAP patient charges as outlined in legislation. The HRSA RWHAP statute defines who MUST NOT have a charge imposed, who MUST have a charge imposed, and limits the amount that CAN be imposed in a calendar year.

Nominal Fee – A fee greater than zero.

Payments - The collection of fees from payers that are applied to cover some aspect of the costs of billable services.

Ryan White HIV/AIDS Program - The program funded by the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act. RWHAP is a federal legislation created to address the health care and supportive service needs of people living with HIV/AIDS (PLWHA) and their families in the United States and its territories. The law emphasizes providing lifesaving and life-extending services for people living with HIV/AIDS.

Schedule of Charges - A comprehensive list of prices for billable services and/or procedures.

Sliding Fee Scale - A variable price schedule for services rendered that are based on a customer's ability to pay such fees. The costs change according to the customer's income or lack thereof, and ability to pay.

Sub-recipient - A Non-Federal entity that expends Federal awards (from HRSA) received from a pass-through entity (like DC Health) to conduct the Federal (Ryan White) program

	<p>by providing direct services to customers and their families. Sub-recipients do not include an individual that is a beneficiary of such a program. A sub-recipient may also be a grant recipient of other Federal awards directly from a federal awarding agency.</p>
<p>IV. Assessing Charges for RWHAP DC EMA: Income Limits for Services</p>	<p>Charges to customers with incomes greater than 100% of the federal poverty level (FPL) are determined by the schedule of charges. Annual imposition of charges for Ryan White services, including ADAP, are based on percent of customer’s annual income, as follows:</p> <p>5% for customers with incomes between 100% and 200% of FPL</p> <p>7% for customers with incomes between 200% and 300% of FPL</p> <p>10% for customers with incomes greater than 300% of FPL</p> <p>A nominal fee may be imposed at the sub-recipient’s discretion.</p> <p>Note: The income limit for the Washington DC Eligible Metropolitan Area Ryan White Program is 500% FPL.</p>
<p>V. Policy Requirements and Section 2617(c) of the PHS Act: Imposition of Charges</p>	<p>Imposition of Charges</p> <p>HRSA RWHAP statute defines who MUST NOT have a charge imposed, who MUST have a charge imposed, and limits the amount of charges that CAN be imposed in a calendar year (Annual limitation on amounts of charge (cap)).</p> <p>There is a limitation on aggregate charges (cap) imposed during the calendar year based on the customer’s annual gross income. All fees must be waived once a RWHAP customer reaches their cap for that calendar year.</p> <p>The calculated cap on charges will change if there is a change in an individual’s annual gross income or the FPL Guidelines. Since caps on charges are based on individual annual gross income, each RWHAP customer’s income must be documented, even if household income is used to determine HRSA RWHAP eligibility.</p> <ul style="list-style-type: none"> • A cap on charges applies to all HRSA RWHAP customers, regardless of income or healthcare coverage • Caps are based on the charges being imposed on the RWHAP customer, not the actual fee for service • Charges are applied when services are rendered, not upfront • Caps are based on the calendar year

	<p>Ryan White Services eligible for imposition of charges:</p> <ul style="list-style-type: none"> • Imposition of charges applies to those services for which a distinct fee is typically billed within the local market. • These services can be billed to other payors within the EMA. • The services include Outpatient Ambulatory Health Services; Mental Health; Substance Use Disorder (Outpatient); Substance Use Disorder (Residential); Oral Health; Medical Nutrition Therapy; and Home and Community Based Services. <p>Sub-recipients must:</p> <ul style="list-style-type: none"> • Calculate each RWHAP customer’s annual cap based on their individual annual gross income • Inform the customer of their cap and their responsibility to track all charges • Aggregate/add up or track all applicable charges • Stop imposing charges on RWHAP customer when cap is met
<p>VI. Policy Requirements and Section 2617(c) of the PHS Act: Sliding Fee Scale</p>	<p>Sliding Fee Scale</p> <p>Following Section 2617(c) of the PHS Act, RWHAPs must have a sliding fee scale if customers are billed for services. RWHAP service providers must develop a sliding fee scale for customers accessing services through RWHAP. Fees are imposed on the RWHAP customer for services based on the customer’s annual gross income (See Section IV - FPL above).</p> <p>A schedule of charges may take the form of a flat rate or a varying rate (e.g., sliding fee scale). The schedule of charges must be developed by the sub-recipient to determine the amount of money to charge a customer. The schedule of charges is applied to uninsured customers with incomes above 100% FPL and applied to insured customers (see Section IV-FPL above).</p> <p>The schedule of charges scale will be based on the most current Federal Poverty Guidelines (FPL). The sub-recipient must develop a fee scale and submit it to the program officer for approval. Once the fee scale has been reviewed and approved by HAHSTA, it will be publicly displayed at the service location.</p> <p>Sub-recipients may decide to impose nominal charges instead of sliding fee scale.</p> <p>Sub-recipients should have the following:</p> <ul style="list-style-type: none"> • An approved schedule of fees which is also called a charge master, • Established fees that are reasonable and necessary,

	<ul style="list-style-type: none"> • Establishment of a discount of charges based on ability to pay according to the sliding fee scale • A written statement that no customer is denied care due to an inability to pay <p>As the sliding fee scale is implemented, the RWHAP does not require collection of the fee charged to customers. Sub-recipients shall make attempts to collect fees charged and document those attempts, however; customers may not be referred to collection agencies for non-payment of those fees.</p> <p>Note: No eligible Ryan White customer will be denied Ryan White services, regardless of the individual's ability to pay for the service.</p>
<p>VII. Monitoring Cap on Charges</p>	<p>It is the responsibility of the RWHAP customer to track and report charges incurred. However, sub-recipients need to:</p> <ul style="list-style-type: none"> • Inform RWHAP customers of their responsibility to track and submit other RWHAP provider charges or out-of-pocket payments. • Review documentation of HIV-related charges or payments provided by the RWHAP customer to determine if they are allowable. • Track the charges imposed on RWHAP customers and have a process in place, outside of the existing fiscal management system, which tracks other allowable HIV-related charges as submitted by the customer. • Have a process in place that will alert the provider that the RWHAP customer has reached the cap and should not charge for the rest of the calendar year. • Track other HRSA RWHAP imposed charges and other related out-of-pocket payments submitted by customers. (Charges include enrollment fees, premiums, deductibles, cost sharing, co- payments, or similar charges. This applies to all services for which the provider imposes a charge. • Aggregate all charges. • Waive any additional charges for the remainder of the calendar year once the cap is met.
<p>VIII. Fiscal Monitoring</p>	<p>HAHSTA will monitor the sub-recipient's compliance with the imposition of charges policies and procedures during comprehensive site visits. The fiscal monitoring team will review the following:</p> <ul style="list-style-type: none"> • The schedule of charges and cap on charges to ensure that they meet legislative requirements. • The customer eligibility determination procedures for imposition of charges based on the schedule to ensure that customers with incomes below 100% of the FPL are not charged for services. • The accounting system used for tracking patient charges, payments, and adjustments and the review of records of charges and payments to ensure compliance with caps on charges. • The customer records and documentation of actual charges and payments to ensure that the policy is being correctly and consistently enforced.

IX. Key Contacts	Ebony Fortune, Ryan White HIV/AIDS Program Manager, 202.671.4900 or Ebony.Fortune@dc.gov
X. Related Documents, Forms and Tools	<ol style="list-style-type: none">1. HRSA PCN 16-02 https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/grants/service-category-pcn-16-02-final.pdf2. Services affected by this policy include Outpatient Ambulatory Health Services; Mental Health; Substance Use Disorder (Outpatient); Substance Use Disorder (Residential); Oral Health; Medical Nutrition Therapy; and Home and Community Based Services.3. Sections 2605(e) and (e)(1) of the PHS ACT.4. Sections 2671(a), (b), and (f) of the PHS Act.5. Sections 2691-2693 of the PHS Act.6. 45 CFR § 75.305(b)(5).7. 340B Program Requirements.8. For additional information, see PCN 15-04.9. Target HIV Microsoft Word - Glossary of Imposition of Charges Terms CLEAN.docx (targethiv.org)