



**CITY OF HOUSTON  
FINANCE & FIRE  
DEPARTMENTS**

<b>Subject : Charity Care Assistance Policy</b>	Related Ordinance No. 2019-1014
	Effective Date: <b>December 17, 2019</b>
Issue Date : June 25, 2020	Revision No:

**1. POLICY STATEMENT**

This **Charity Care Assistance Policy (“CCA Policy”)** is effective for emergency medical services and ambulance transportation services (“EMS Services”) provided by the City of Houston (the “City”) on or after 12:01AM, December 17, 2019. The City, through the Houston Fire Department (“HFD”) provides medically necessary EMS Services without charge or at amounts less than its established rates to Uninsured Patients who meet the Eligibility Criteria of this CCA Policy. The Eligibility Criteria (as defined in Section 6) consider the Uninsured Patient’s individual and family income, family size, permanent housing status, employment and other factors as described herein. In certain instances, the City may determine that the Uninsured Patient is presumptively eligible for CCA as described herein.

This Policy shall be administered, implemented and enforced by the Finance Director.

**2. POLICY PURPOSE**

The purpose of this Policy is to establish the criteria to determine whether an Uninsured Patient requiring EMS Services, but who does not have the financial ability to pay for those services, may be eligible for the City to provide financial assistance. The City recognizes that a person requiring EMS Services often may be faced suddenly and unexpectedly with a broad spectrum of health care related costs, employment concerns and other expenses beyond the costs incurred to the City. These unexpected circumstances may directly impact a patient’s ability to pay for an EMS billing. The maximum total dollar amount for CCA shall not exceed the amount transferred to a secondary collection vendor(s) in a given fiscal year by the EMS Billing Vendor.

This Policy is intended to comply with Section 355.8210(b)(3) of the Texas Administrative Code.

**3. DEFINITIONS**

- 3.1. **Charity Care Assistance (“CCA”).** EMS Services provided without expectation of reimbursement to Uninsured patients who meet the requirements of this Policy. CCA further does not include ambulance accounts placed on the City’s “uncollectible transports list” in accordance with City Code of Ordinances Section 4-14, and designated by the Director as bad debt.
- 3.2. **Date of Service.** The date on which the City provided EMS services to the Uninsured Patient.
- 3.3. **EMS Billing Vendor.** Primary vendor that performs billing and collection services for EMS fees charged to individuals (e.g., Transports, Treatment without transport, or any other fees as directed by the City).

Approved: DocuSigned by: <i>Tantiri Emo</i> E73A5FD3483F467...	Date Approved: 6/26/2020	DocuSigned by: <i>Samuel Pena</i> 9329BAD08AC849B...	6/26/2020	Page 1 of 3
---	-----------------------------	--	-----------	-------------

- 3.4. **Finance Director (“Director”).** The Director of the City’s Department of Finance or his/her designee(s). Designees may include the City’s EMS Billing Vendor, secondary collection vendors, city employees and other qualified persons as determined by Director in writing.
- 3.5. **Homeless Person.** A person experiencing homelessness, meaning an individual who lacks a fixed, regular, and adequate nighttime residence, meaning he: (i) has a primary nighttime residence that is a public or private place not meant for human habitation; (ii) is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or (iii) is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution. An individual may be deemed as experiencing homeless if HFD makes such determination at the time of service or if the EMS Billing Vendor makes the determination during the billing process.
- 3.6. **Uninsured Patient.** An individual who has no health insurance or other source of third-party coverage for the EMS services provided.

**4. POLICY IMPLEMENTATION**

- 4.1. The Director shall establish written guidelines, rules, policies, forms and procedures necessary and appropriate to implement this CCA Policy consistent with the terms herein;
- 4.2. The City’s EMS Billing Vendor is authorized to and shall include information about this Policy in its first communication with each patient, or as soon as practicable thereafter.

**5. ELIGIBILITY REQUIREMENTS**

- 5.1. Only Uninsured Patients, as defined herein, are eligible for CCA;
- 5.2. Application Process. All Uninsured Patients, including applicants for financial assistance, will need to complete CCA application (Attachment A) and shall undergo a financial screening to determine his or her eligibility.
- 5.3. Presumptive Eligibility. If a patient has been notified of the CCA Policy, but failed to complete and submit a CCA Application, the Director shall instruct and require the EMS Billing Vendor to routinely screen nonresponsive uninsured patients to determine whether the eligibility Criteria (see Paragraph 6) has been met. The Director will issue written guidelines for this process as he/she deems necessary.
  - 5.3.1. Director may use an outside agency(ies) in determining income level(s) and other information such as credit scores, family size and employment status, or public information sources such as US Census data for the basis of determining CCA eligibility and potential assistance. (This screening may include independent third-party sources to evaluate financial assistance eligibility).
  - 5.3.2. The Director at his/her discretion may establish and apply written standards to determine that a formal written application is not required, this includes circumstances where no documentation or information is available to determine the Uninsured Patient’s eligibility.
  - 5.3.3. The EMS Billing Vendor shall notify each Uninsured Patient who is determined to be presumptively eligible for CCA. When reasonably possible, a presumptively eligible individual shall be treated as if he had been approved for CCA based on a completed, approved CCA Application.

## 6. ELIGIBILITY CRITERIA:

An Uninsured Patient shall be eligible for a **100% discount from** billed amounts for EMS Services if he or she meets one or more of the following conditions (“Eligibility Criteria”) on the Date of Service unless otherwise indicated:

- a. Experiencing homelessness, or has received care from a facility that offers temporary or transitional housing or shelter or other supportive services to persons experiencing homelessness within 12 months before or after Date of Service;
- b. Deceased, with no known estate available to pay for the EMS Services;
- c. Incarcerated, or has been incarcerated within 12 months before or after the Date of Service; evidence of arrest shall be considered incarceration for eligibility purposes;
- d. Currently (at the time of billing) eligible for Medicaid, but did not have Medicaid on the Date of Service;
- e. Deemed ineligible to receive assistance from the State under the Violent Crimes Victims Compensation Act or the Sexual Assault Victims Compensation Act;
- f. Previously determined to be eligible for CCA for EMS Services provided during the 12 months preceding the current Date of Service;
- g. Eligible for Harris County Gold Card (Harris Health Financial Assistance Program);
- h. Filed personal bankruptcy in federal court, and the case has been pending at any time during 12 months before or after the Date of Service;
- i. Eligible for State-funded prescription programs;
- j. Eligible for participation in Women, Infants and Children programs (WIC);
- k. Eligible for food stamps;
- l. Eligible for subsidized school lunch program;
- m. Eligible for other need-based federal, state or local assistance programs includes, but not limited to Lone Star Card Program, Temporary Assistance for Needy Families (TANF) Program, Supplemental Security Income (SSI) and Section 8 Housing);
- n. Residence address is subsidized housing, or individual is eligible for rent voucher from federal/state, housing authority or City;
- o. Household income at or below 250% of the then-current Federal Poverty Guidelines;
- p. Credit Score from major credit reporting agency at or **below 500;** within 12 months after the Date of Service.
- q. Other conditions which, in the discretion of the Director, are consistent with the purposes, intent and terms of the Policy and comply with applicable law.

## 7. APPEALS

Applicant has the right to appeal the City’s decision on eligibility for CCA within 30 days of notification of non-eligibility. Finance Director will review and respond to the applicant within 90 days from receipt of appeal request. Appeal can only be submitted based upon the following:

- 7.1 A change in the applicant's financial status has occurred during the time period prescribed in the Eligibility Criteria for the applicable criterion; or
- 7.2 Incorrect information was unintentionally provided.

Attachment A – Request for Charity Care Assistance Form

Approved:  
DocuSigned by:

Tantri Emo

E73A5FD3483F467...

DocuSigned by:

Samuel Pena

9329BAD08AC849B...

Date Approved:

6/26/2020

6/26/2020

Page 3 of 3