

Service Provider Fact Sheet

Understanding Hospital Charity Care Laws in Illinois

Your client may be eligible for free or discounted medical services at hospitals in Illinois.

It's the law! ONE Northside, with the Fair Care Coalition, helped win this victory. Patients have the right to apply for free or discounted services and hospitals are required to provide uninsured patients with a Hospital Financial Assistance Application.^{1,2}

How does a patient qualify for discounted hospital care and who is eligible?

If a patient is uninsured, he or she should fill out a Hospital Financial Assistance Application and submit it to the hospital. The application can help determine if a patient is eligible for free or discounted services or other public programs that can help pay for his or her healthcare.

On the back of this fact sheet is an income chart that corresponds to the income eligibility levels noted in the chart at the bottom of this page. Also, a list of criteria for presumptive eligibility is on the back of this sheet. If any of the criteria in that chart apply to your patient or client, then he or she is to be deemed presumptively eligible for financial assistance.¹

Is a Social Security Number required?

A Social Security number is not required to qualify for free or discounted healthcare.¹

How much time does a patient have to apply for a discount?

Hospitals are required to allow a patient at least 60 days to complete and submit the form following the date of discharge or receipt of outpatient care.¹

What if English is not the patient's first language?

Hospitals are required to provide the Financial Assistance Applications in English and in any other language that is the primary language of at least 5% of the patients served by the hospital annually.¹

How can I learn more?

For further information, the Illinois Office of the Attorney General has outlined the rules for Hospital Financial Assistance under the Fair Patient Billing Act¹, including stipulations and required language for the application. The Hospital Uninsured Patient Discount Act² is also pertinent to this fact sheet. See references on opposite side for further information.

Using Income Eligibility to Determine Level of Assistance²:

<u>Conditions that apply to all</u>	<u>Type of Hospital</u>	<u>Income Levels/FPL</u>	<u>Discount to be provided</u>
If the patient is: 1) Uninsured; and, 2) applies for a discount; 3) for: medically necessary health care services that exceed \$300 for one inpatient admission or outpatient encounter	Urban Hospitals	Annual family income of less than 200% of the Federal Poverty Level (FPL)	Hospital shall provide a charitable discount of 100%
		Annual family income of between 200% and 600% of the FPL	Hospital shall provide a discount from its charges
	Rural Hospitals	Annual family income of less than 125% of the FPL	Hospital shall provide a charitable discount of 100%
		Annual family income of between 125% and 300% of FPL	Hospital shall provide a discount from its charges

Produced by: Health and Medicine Policy Research Group

Questions or concerns: Hannah Gelder, ONE Northside, 773-769-3232 x19 or hgelder@onenorthside.org

Service Provider Fact Sheet

Understanding Hospital Charity Care Laws in Illinois

2013 Poverty Guidelines (Annual Income)³:

# of Persons in Family	Federal Poverty Level Guideline for annual income (FPL)	125% of FPL	200% of FPL	300% of FPL	600% of FPL
1	\$11,490	\$14,363	\$22,980	\$34,470	\$68,940
2	\$15,510	\$19,388	\$31,020	\$46,530	\$93,060
3	\$19,530	\$24,413	\$39,060	\$58,590	\$117,180
4	\$23,550	\$29,438	\$47,100	\$70,650	\$141,300
5	\$27,570	\$34,463	\$55,140	\$82,710	\$165,420
6	\$31,590	\$39,488	\$63,180	\$94,770	\$189,540
7	\$35,610	\$44,513	\$71,220	\$106,830	\$213,660
8	\$39,630	\$49,538	\$79,260	\$118,890	\$237,780
For additional persons, add:	\$4,020	\$5,025	\$8,040	\$12,060	\$24,120

Presumptive eligibility criteria¹:

An uninsured patient is to be deemed presumptively eligible for free or discounted care if he/she, a family member, or advocate can demonstrate that any one of the following criteria applies to the patient.

Criteria	Type of Hospital	
	Urban Hospitals	Rural Hospitals
Homeless	X	X
Mentally incapacitated with no one to act on patient's behalf	X	X
Medicaid eligible, but not on date of service	X	X
Medicaid eligible, but utilize a service that is not covered by Medicaid	X	X
Deceased with no estate	X	X
Enrolled in the Women, Infants, and Children Nutrition Program (WIC)	X	
Enrolled in the Supplemental Nutrition Assistance Program (SNAP)	X	
Enrolled in the Illinois Free Lunch and Breakfast Program	X	
Enrolled in the Low Income Home Energy Assistance Program (LIHEAP)	X	
Enrollment in an organized community-based program providing access to medical care that assesses and documents limited low-income financial status as a criterion for membership	X	
Receipt of grant assistance for medical services	X	

References:

¹Part 4500 of the Hospital Financial Assistance Under the Fair Patient Billing Act. Available online:

<http://www.ilga.gov/commission/jcar/admincode/077/07704500sections.html>

²Hospital Uninsured Patient Discount Act. Available online:

<http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=3001&ChapterID=21>

³2013 Poverty Guidelines. Available online: <http://aspe.hhs.gov/poverty/13poverty.cfm>

Produced by: Health and Medicine Policy Research Group

Questions or concerns: Hannah Gelder, ONE Northside, 773-769-3232 x19 or hgelder@onenorthside.org