

Paying for Services

Border Region Behavioral Health Center (BRBHC) strives to complete all financial assessments for individuals within the first 30 days of services to capture the finances of all individuals who are 18 years or older and the person's spouse or parents of the person who is under 18 years. Financial Assessments will be renewed at least annually and/or whenever a significant financial change occurs. BRBHC will determine an individuals' ability to pay based on the individual's financial situation. Inability to pay will not prevent an individual from seeking or receiving services.

Monthly Ability to Pay Scale

An individual's maximum monthly fee is based on the financial assessment and calculated using the Monthly Ability-To-Pay Fee Schedule. The calculation is based on the number of family members and annual gross income, reduced by extraordinary expenses paid during the past 12 months or projected for the next 12 months. If the individual's maximum monthly fee is greater than zero, the individual is determined to have the ability to pay. If two or more members of the same family are receiving services, then the maximum monthly fee is for the family. If the individual has a maximum monthly fee of zero, then the individual is determined to have the inability to pay.

BRBHC Charity Care

BRBHC is committed to providing charity care to individuals who are uninsured, underinsured, or unable to pay for services received. Services provided by BRBHC without charge or at a discount to qualifying individuals fall under the guidelines of charity care.

The services include but are not limited to:

1. Behavioral Health Services
2. Primary Care Services
3. Immunizations
4. Other preventative services

Charity Care Assessment

A request or assessment for charity care and individual determinations may be conducted throughout the length of the treatment episode, however it is BRBHC's practice that an attempt will be made within the first 30 days of treatment. Applications and financial need assessments must be conducted utilizing BRBHC's person-centered, trauma-informed, and Certified Community Behavioral Health Clinic values. Requests for charity care shall be processed promptly with notification to the individual and/or LAR in writing within 30 days of receipt of a completed application assessment. The need for charity care eligibility will be re-evaluated at least annually and/or at the time of a significant reported change by the individual and/or LAR which may affect eligibility to the charity care program.

Charity Care Eligibility

Eligibility for charity care will be considered for individuals who fall under the categories of uninsured, underinsured, or who are unable to pay their care at the time of their financial determination as documented in the BRBHC electronic health record. The granting of charity care is based on individualized determination of financial need and does not include access based on age, gender, race, ethnicity, citizenship status, sexual orientation, or religious affiliation.

Completion of Application and Financial Assessment

Financial need is determined through the completion of individualized financial assessments and may include:

- An application or assessment, in which the individual or the individual's Legally Authorized Representative (LAR) are required to cooperate and supply personal financial and/or other information pertinent to determine financial needs.
- The use of external publicly available data sources providing the individual's or LAR's ability to pay (such as credit scoring).
- Good faith efforts by BRBHC to explore alternative sources of payment and coverage from public and private pay programs as deemed appropriate and assist clients in the process of applying for such programs.
- Consideration of the client's available assets and all other financial resources available to the client.
- A review of client's outstanding accounting receivables and liabilities for services rendered in the past and payment history.

Individual Charges

BRBHC will utilize the approved Sliding Fee Scale, in accordance with financial need in effect at the time of the determination. The basis for the amounts charged to individuals served who qualify for charity care are as follows:

- Individuals whose family income is at or below 150% of the FPL are eligible to receive a discount rate of 100%
- Clients whose family income is above 150% but no more than 200% the FPL are eligible to receive services at a discount (partial charity care) at rates discounted utilizing the approved Sliding Scale Fee Schedules. Uncollected fees will be assessed as Bad Debt and will be ineligible for reimbursement under federal charity care programs.
- Clients whose family income exceeds 200% of the FPL may be eligible to receive discounted rates on a case-by-case basis based on specialized circumstances, such as catastrophic illness or medical indigence, at the discretion of BRBHC. The discounted rates shall not be greater than the amount generally billed to private or public insurance and discounted using Sliding Scale Fee Schedules. Uncollected fees will be assessed as Bad Debt and will be ineligible for reimbursement under federal charity care programs.