



## PRIMARY CARE OFFICE

### DISCOUNTED/SLIDING FEE SCALE REQUIREMENTS

The Pennsylvania Primary Care Office (PCO) administers the following programs with the goal of providing a safety-net for access to health care for low-income populations, including those without health insurance: Community-Based Health Care Program, Health practitioner Loan Repayment Program, Conrad 30 J-1 Visa and National Interest Waiver Programs. As such, the Department requires organizations wishing to participate in these programs to have a sliding fee discount program in place for at least **six consecutive months** before applying and policy must comply with the following requirements:

- Use of a discounted/sliding fee scale based on the most current Federal Poverty Guidelines to ensure that no financial barriers to care exist for those who meet certain financial eligibility criteria;
- Posting a statement indicating that no one who is unable to pay will be denied access to services;
- Having a policy of non-discrimination in the delivery of health care services.

#### **What is a discounted/sliding fee schedule?**

Discounted/sliding fee schedules are locally driven mechanisms (discounts) to address how to equally charge patients for services rendered. The mechanism must be in writing. Fees are set based upon current, annual federal poverty guidelines; patients' eligibility is determined by annual income and family size. Schedules are established and implemented to ensure that a non-discriminatory, uniform, and reasonable charges are consistently and evenly applied, on a routine basis. For patients whose income and family size place them below 100% of poverty level, a "typical" nominal fee is often between \$7 and \$15; Patients between 101 to 200% of the poverty are expected to pay some percentage of the full fee. **Patients who document no ability to pay should be treated without charge.** A discounted/sliding fee scale fee schedule applies only to amounts assessed to patient. Billing for third party coverage, i.e., Medicare, Medicaid, private insurance carriers, etc., is set at the usual and customary full charge.

#### **Why have a discounted/sliding fee schedule?**

Program requirements prescribe that a local determined discounted/sliding fee schedule be used, and that services be provided either at no fee or a nominal fee, as determined by the provider to ensure access to health care for those who cannot fully pay full charges. The reasonableness of fees, and the percent of the full fee that is assessed may be subject to review/challenge by the Department during the program application process or during routine programmatic review by Department project officers or program administrators.

#### **To which patients does a discounted/sliding fee schedule apply?**

By participating in any of the department programs requiring a discounted/sliding fee schedule, you are agreeing to apply this schedule equally, consistently, on a continuous basis, to all recipients of services in the entirety of the site/location, without regard to a particular practitioner that treats them.

#### **Where can I find more information on developing a discounted/sliding fee schedule and policy.**

The National Health Service Corps has developed a Discounted/Sliding Fee Schedule Information Packet for guidance.

#### **Where can I find more information on federal poverty guidelines?**

Federal poverty guidelines are updated and published annually in the federal registry they can be accessed at [Poverty Guidelines | ASPE \(hhs.gov\)](#)