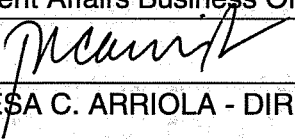


| GUAM BEHAVIORAL HEALTH AND WELLNESS CENTER | | |
|--|-----------------------------------|---|
| TITLE: Sliding Fee Discount Schedule | POLICY NO: AD-PA-03 | Page 1 of 2 |
| RESPONSIBILITY: Patient Affairs Business Office | | |
| APPROVED BY:  THERESA C. ARRIOLA - DIRECTOR | DATE OF ORIGINAL APPROVAL: | LAST REVIEWED/REVISED: 7/1/20 |

POLICY:

- A. Guam Behavioral Health and Wellness Center (GBHWC) shall utilize the "Federal Poverty Guidelines for the 48 Contiguous States and the District of Columbia" to establish annually its sliding fee discount schedule based on the income and family size criteria.
- B. GBHWC's sliding fee discount schedule shall be reviewed and changed annually to reflect the most current updated Federal Poverty Guideline set forth by the Census Bureau and issued each year in the Federal Register by the Department of Health and Human Services (HHS).
- C. Sliding fees for all behavioral health services shall be based on adjusted incomes for each family size for 100%, 125%, 150%, 175% and 200% of poverty level. This will apply to the fees charged for services.
- D. A nominal fee shall be collected from consumers at or below 100% of the Federal Poverty Guideline. If the consumer cannot pay the nominal fee at the time of the visit, it will be decreased from \$10 to \$5 so that any financial constraint does not pose as a barrier to receiving behavioral health care.
- E. All consumers, including those not yet enrolled in the "Sliding Fee Discount" program shall NOT be denied of any GBHWC services regardless of their ability to pay for services.
- F. The Administrative Services Officer (ASO) must provide a "Sliding Fee Discount Schedule" to the Director, Deputy Director, Division Administrators and Medical Director for review on an annual basis prior to Adjudication by the Legislature.
- G. The Sliding Fee Discount Schedule program flyer shall be visibly posted in the medical record, all clinical treatment areas, billing and registration areas so that it is clearly visible for the public to view and be notified of such discount. Staff shall also verbally notify clients of the "Sliding Fee Discount" program by word of mouth.

RESPONSIBILITY

- A. Administrative Service Officer (ASO)
 1. Shall annually obtain the "Federal Poverty Guidelines by logging into google.com and typing Federal Poverty Guideline or following <https://aspe.hhs.gov/2019-poverty-guidelines>.
 2. Shall develop the Sliding Fee Discount Schedule which is a matrix of annual incomes of family sizes adjusted for 100%, 125%, 175% and 200% of poverty level.

3. Shall provide the Management with Fee Schedule annually for review prior to Adjudication by the Legislature and approval.

REFERENCE(S):

Federal Register. (2019). *42 U.S.C. 9902(2) Poverty guideline*. U.S Dept. of Health and Human Services. U.S Dept. of Health and Human Services. Retrieved from <https://aspe.hhs.gov/2019-poverty-guidelines>

ATTACHMENT(S):

DATE REVIEWED:



GUAM BEHAVIORAL HEALTH & WELLNESS CENTER

790 Gov. Carlos G. Camacho Rd. Tamuning, Guam 96913

TEL: (671) 647-5330 FAX: (671) 649-6948

REVIEW AND ENDORSEMENT CERTIFICATION

The signatories on this document acknowledge that they have reviewed and approved the following:

Policy Title: Sliding Fee Discount Schedule

Policy No: AD-PA-03

Initiated by: Marilyn Aflague

| Date | Signature |
|-----------|-----------|
| 6-15-2020 | |

Marilyn Aflague
Administrative Services Officer

| Date | Signature |
|-----------|-----------|
| 6/17/2020 | |

Reina Sanchez, M.A.
Clinical Administrator Division of Clinical Services

| Date | Signature |
|---------|-----------|
| 6.24.20 | |

Anrie Unpingco LCSW, LPC
Child Adolescent Services Division Administrator

| Date | Signature |
|-----------|-----------|
| 6-19-2020 | |

Leonora G. Urbano MSN, RN-BC
Deputy Director

| Date | Signature |
|------------|-----------|
| 06/29/2020 | |

Dr. Ariel Ismael
Medical director

| Date | Signature |
|-----------|-----------|
| 6/30/2020 | |

Carissa Pangelinan
Deputy Director

Not 06/29/20-012(m)

