## **Devereux Florida - Transparency in Billing Practices**

# **Devereux Florida Standard Rates - Outpatient Services**

Service Description	Procedure Code	Modifier	Rate
Psychiatric evaluation by a physician	H2000	HP	\$210.00 per evaluation
Psychiatric evaluation by a non-physician	H2000	НО	\$150.00 per evaluation
Brief behavioral health status exam	H2010	НО	\$14.66/per quarter hour
In-depth assessment, new patient, mental health	H0031	НО	\$125.00 per assessment
In-depth assessment, established patient, mental health	H0031	TS	\$100.00 per assessment
Limited functional assessment, mental health	H0031		\$15.00 per assessment
Treatment plan development, new and established patient, mental health	H0032		\$97.00 per event
Treatment plan review, mental health	H0032	TS	\$48.50 per event
Medication management	T1015		\$60.00 per event
Behavioral health medical screening, mental health	T1023	HE	\$43.62 per event
Behavioral health medical screening, substance abuse	T1023	HF	\$43.62 per event
Behavioral health-related medical services: verbal interaction, mental health	H0046		\$15.00 per event
Psychosocial rehabilitation services	H2017		\$9.00 per quarter hour
Individual and family therapy	H2019	HR	\$18.33 per quarter
Group therapy	H2019	HQ	\$6.67 per quarter hour
Therapeutic behavioral on-site services, therapy	H2019	НО	\$16.00/per quarter hour

Please note that this information is a non-personalized estimate of costs that may be incurred for anticipated services and that actual costs will be based on services actually provided. In addition, you have the right to request a personalized estimate from Devereux.

### **Financial Assistance**

To help individuals get the care they need, Devereux provides financial assistance for medically necessary care to individuals who meet the eligibility requirements. If Devereux determines that an individual is eligible, they may discount or waive an individual's financial obligation for care.

## WHO IS ELIGIBILE?

## **Financially Indigent**

A financially indigent patient is a person who is uninsured or underinsured and is accepted for care with no obligation or a discounted obligation to pay for the services rendered based on the hospital's eligibility criteria.

To be eligible for charity care as a financially indigent patient, a person's income shall be at or below 200 percent of the federal poverty guidelines and is unable to pay the bill. Devereux may consider other financial assets and liabilities of the person when determining ability to pay.

At any time prior to collection of the patient's account, Devereux may, upon review of the patient's current financial condition, re-assess the patient's status and make a new determination. However, once a patient is deemed to be financially indigent, no further determinations will be made.

Devereux will use the most current poverty income guidelines issued by the U.S. Department of Health and Human Services to determine an individual's eligibility for charity care as a financially indigent patient. The poverty income guidelines are published in the Federal Register in February of each year and will become effective the first day of the month following the month of publication.

## **Medically Indigent**

To be eligible for charity care as a medically indigent patient, the amount owed by the patient on the bill after payment by third-party payers must exceed 5 percent of the patient's annual gross income and the patient must be unable to pay the remaining bill as determined by Devereux. Devereux may consider other financial assets and liabilities of the person when determining ability to pay. At any time prior to collection of the patient's account, Devereux may, upon review of the patient's current financial condition, re-assess the patient's status and make a new determination. However, once a patient is deemed to be medically indigent, no further determinations will be made.

A determination of a patient's ability to pay the remainder of the bill will be based on whether the patient can be reasonably expected to pay the account in full over a two-year period.

If a determination is made that a patient has the ability to pay the remainder of the bill, such a determination does not prevent a reassessment of the patient's ability to pay at a later date. Once a patient is deemed to be medically indigent, no further determinations will be made.

#### **HOW DO YOU APPLY?**

### **Application Process**

Please contact the Devereux Business Office at 407-362-9210 to receive the Application for Charity Care and Financial Assistance.

The Business Office will refer those patients who may qualify for financial assistance from a governmental program to the appropriate program, such as Medicaid. Patients who are eligible for Medicare, Medicaid, or any governmental or other healthcare, mental health or behavioral healthcare coverage may not qualify as indigent.

A determination will be made concerning the patient's eligibility for charity as information concerning the patient's financial resources is available. No collection efforts will be pursued on a charity account after such determination is made.

### HOW IS FINANCIAL ASSISTANCE APPLIED?

#### **Discounts Available**

The discounts available are based on the percentage of a patient's income in relation to the federal poverty guidelines and are as follows:

- Patient's with family income below 200% of the Federal Poverty Guidelines supported by appropriate documentation as determined by the Business Office, will be eligible for 100% Charity Care.
- Patient's with family income in excess of 201% but not exceeding 300% of the Federal Poverty Guidelines will be eligible for an 80% discount.
- Patient's with family income in excess of 301% but not exceeding 400% of the Federal Poverty Guidelines will be eligible for a 70% discount.

Patients eligible for Financial Assistance will not be billed more than what Devereux would receive if the patient were eligible for Medicaid. This is referred to in the IRS regulations as the "Prospective Method" of calculating amounts generally billed.

## **Application of Discounts**

The application of discounts is based on the Standard Rates charged by Devereux.

#### **Devereux Collections Statement**

Devereux expects all guarantors to promptly pay any remaining patient responsibility balance upon notification by Devereux of the amount owed. Should the patient or guarantor dispute a balance, Devereux staff will investigate the dispute and take any necessary corrective action before further pursuing payment from the guarantor. An account is considered delinquent if the guarantor fails to either make full payment or acceptable payment arrangements within 30 days from notification of the amount owing. After all reasonable collection efforts have been made within 90-120 days, the account will be assigned to either an attorney or collection agency for additional follow-up and collection action.

Please contact the health care practitioners anticipated to provide services to you while in at Devereux regarding a personalized estimate, billing practices and participation with your insurance provider or health maintenance organization (HMO) as the practitioners may not participate with the same health insurers or HMO as Devereux.