

Patient Financial Assistance

**Appendix A  
Financial Assistance Exceptions Table**

Category	Definition	Program Eligibility		Service Definitions
		Discount	Charity Care	
<b>Category 1</b>	Medically Necessary	Y	Y	Most Services
<b>Category 2</b>	High Cost Treatment; Other Alternatives Usually Available	Y	N	Cochlear implant LDL apheresis Transplants Bariatric surgery Deep brain stimulation Penile or testicular implant Vasectomy reversal Left Ventricular Assist Device (see Transplant policy) Pediatric Hearing aids (ages to 21) Preservation reproductive opportunities after cancer treatment (IVF for PROACT) Services provided to Veterans Administration recipients who refuse transfer to a VA facility Any other procedure which does not meet medical necessity criteria
<b>Category 3</b>	Excluded Services	N	N	Cosmetic surgery/procedures* Infertility Evaluation and Treatment Non-medically necessary obstetric ultrasound Optical Shop products Routine eye exams Contact lenses or exams* Hearing aids Acupuncture Non-medically necessary virtual colonoscopy Non-medically necessary full body MRI Ultrasound Tissue Characterization Scanning Ultrasound Tissue Characterization Evaluation Flograft injections Health Related products offered for sale in-office/clinic or any "dummy" billing code not covered by insurance.
<b>Category 4</b>	Uninsured Discount	N	Y	Rex Rehabilitation and Nursing Care Centers of Raleigh and Apex in accordance with Section III.B.3.k. UNCH Hospital Dental Clinic UNC Rockingham Rehabilitation & Nursing Care Center in accordance with Section III.B.3.k.

\*Cosmetic surgery is not eligible for a payment plan. Full payment required prior to service.

**Appendix B**  
**Financial Assistance Copayments**

<b>Physician Services</b>	<b>Copayment</b>
Primary Care Clinic Visit (per appointment even if on same day)	\$10
Specialty Care Clinic Visit (per appointment even if on same day)	\$10
<ul style="list-style-type: none"><li>Excludes: Hospital recurring visits</li></ul>	
Urgent Care (non-specialty) (per visit even if on same day)	\$35
<ul style="list-style-type: none"><li>Excludes: Pardee Urgent Care Centers do not participate in the UNC Financial Assistance program.</li></ul>	

<b>Hospital Services</b>	<b>Copayment</b>
Emergency Department (ED) / Room (ER)	\$50
Inpatient Admission	\$100
Wakebrook Residential Unit Admission	\$100
Ambulatory Surgery	\$75
Ancillary Services	\$10
<ul style="list-style-type: none"><li>Excludes: Physical Therapy and Occupational Therapy</li></ul>	
Children's Primary Care Medical Center	\$10
Recurring Visits (per month)	
<ul style="list-style-type: none"><li>Cardiac / Pulmonary Therapy</li></ul>	\$20
<ul style="list-style-type: none"><li>Eating Disorder visits</li></ul>	\$0
<ul style="list-style-type: none"><li>Physical, Occupational, Speech Therapy</li></ul>	\$20
<ul style="list-style-type: none"><li>Radiation Oncology Treatments</li></ul>	\$75

**Definitions**

**Primary Care**

- Visits occurring in Family Medicine, Children's Primary Care, or General Internal Medicine Clinics.

**Project Access of Johnston and Harnett**

- Patients eligible for UNC Financial Assistance due to participation with Project Access of Johnston or Harnett Counties, will not be required to pay a copay for UNCPN primary care visits, specialty physician clinic visits, and hospital visits to Johnston Health Services

**Insurance Copays**

- Insured patients who are eligible for UNC Financial Assistance will pay their insurance carrier's required copay for services instead of the UNC Financial Assistance copay

## Appendix C: Requirement Definitions for Financial Assistance

### NC Residency Requirements

In order to meet North Carolina state residency requirements, an individual must be domiciled in North Carolina. A person is domiciled in North Carolina if North Carolina is his/her fixed, established, or permanent place of residence with the intention to remain there permanently or for an indefinite period.

To verify NC residency, provide **two** documents from the list below. The documents must be in the name of applicant or applicant's legal spouse and **show the current North Carolina address.**

- a. A valid North Carolina drivers' license or other identification card issued by the North Carolina Division of Motor Vehicles.
- b. A current North Carolina lease or mortgage document, bank statement, or current utility bill.
- c. A current North Carolina motor vehicle registration.
- d. A current North Carolina voter registration card.
- e. Tax return for the applicant or the applicant's legal spouse.
- f. A document verifying that the applicant is employed in North Carolina.
- g. One or more documents proving that the applicant's home in the applicant's prior state of residence has ended, such as closing of a bank account, termination of employment, or sale of a home.
- h. A document showing that the applicant has registered with a public or private employment service in North Carolina.
- i. A document showing that the applicant has enrolled his children in a public or a private school or a childcare facility located in North Carolina.
- j. A document showing that the applicant is receiving public assistance (such as Food Stamps) or other services, which require proof of residence in North Carolina. Work First and Energy Assistance do not currently require proof of NC residency.
- k. Records from a health department or other health care provider located in North Carolina.
- l. A written declaration from an individual who has a social, family or economic relationship with the applicant, and who has personal knowledge of the applicant's intent to live in North Carolina permanently, for an indefinite period of time, or residing in North Carolina in order to seek employment or with a job commitment.
- m. A document from the US Department of Veteran's Affairs, US Military or the US Department of Homeland Security verifying the applicant's intent to live in North Carolina permanently or for an indefinite period of time, or that the applicant is residing in North Carolina to seek employment or has a job commitment.
- n. Official North Carolina school records, signed by school officials, or diplomas issued by North Carolina schools (including secondary schools, colleges, universities, community colleges), verifying the applicant's intent to live North Carolina permanently or for an indefinite period of time, or that the applicant is residing in North Carolina to seek employment or with a job commitment.
- o. A document issued by a foreign consulate verifying the applicant's intent to live in North Carolina permanently or for indefinite period, or that the applicant is residing in North Carolina to seek employment or has a job commitment.

### NC Residency Declaration

**\*Complete this section ONLY when NC Residency Documents CANNOT be provided\***

I  **verify that I CANNOT provide two North Carolina state residency verification documents. By signing below, I affirm and represent that I am a North Carolina resident.**

I hereby declare that the above information is true and accurate. I understand that this declaration form is used to help verify that I meet North Carolina state residency requirements for UNC Health Care Financial Assistance. I understand that a false or misleading declaration by me may result in Charity Care adjustments for which I would not otherwise have qualified, and may subject me to civil and criminal penalties.

Patient Signature:	Sign Date:
Address, city, state and zip code	Primary Phone:

## Appendix C: Requirement Definitions for Financial Assistance

### **Third Party Coverage**

*All patients will be screened for third-party sources of coverage and assistance including but not limited to*

- 1) Personal or Employee Sponsored Health Insurance
- 2) Medicare, Medicaid, CHIP, commercial, or any other third party coverage
- 3) Eligibility for public assistance programs
- 4) Third party coverage from an employer or family member's employer
- 5) Workers' Compensation

### **Income/Assets**

*Income includes total cash receipts from all sources before taxes. Assets include all resources of value available to meet debts. Verification of income is not required for dependents under age 18.*

#### ***Income sources include but are not limited to***

- 1) Wages and salaries
- 2) Self-employment income
- 3) Social security benefits
- 4) Pensions and retirement income/distributions
- 5) Unemployment compensation
- 6) Strike benefits from union funds
- 7) Workers' Compensation
- 8) Disability benefits
- 9) Veterans' payments
- 10) Public Assistance payments
- 11) Training stipends
- 12) Alimony
- 13) Rental Income
- 14) Military family allotments
- 15) Income from dividends, royalties, & interest income
- 16) Income from estates and trusts
- 17) Income from legal settlements
- 18) Regular insurance or annuity payments
- 19) Support from an absent family member or someone not living in the household
- 20) Lottery winnings

#### ***Asset sources include but are not limited to***

- 1) Traditional and/or Alternative bank accounts for checking, savings, money market, HSA
- 2) Investment accounts including stocks, bonds, or cash equivalents.
- 3) Retirement accounts
- 4) Property other than primary residence, both rental and owned

The following will **not** be considered income or assets:

- 1) Food or housing received in lieu of wages
- 2) Non-cash benefits
- 3) Payments from student loans and grants
- 4) Child Support payments
- 5) Clergy/Pastoral housing allowance
- 6) BAH (Basic Allowance for Housing) for military service members
- 7) SSI benefits for a minor dependent, under the age of 18
- 8) Long-term retirement annuities

## Appendix C: Requirement Definitions for Financial Assistance

### Proof of Income Documentation:

- 1) Federal 1040 tax returns for the most recent year including schedules.
- 2) Self-employed patients will provide Schedule C of the federal income tax return, a self-employment verification form, or a company profit and loss statement.
- 3) Consecutive payroll check stubs covering the last 30 days are required. When check stubs are unavailable, employer verification document on letterhead including hourly rate, hours worked, and pay schedule is acceptable.
- 4) Other income from any source not directly related to employment, such as retirement or disability benefits, Social Security or Veteran's Benefits verified with the most recent year award letters, pay stubs, or other valid documentation.
- 5) The most recent month traditional and/or alternative bank account statements for checking, savings, money market, investment, and/or retirement accounts. Must be in bank statement format showing beginning balance, transactions, and ending balance. The last four digits of the account number must be visible.
- 6) Tax value of owned property other than primary residence. If other property is a rental property, patients will provide Schedule E of the federal income tax return, a lease agreement, or payment receipts from tenant.
- 7) Patients who are employed but due to a temporary medical condition rendering them unable to work are not drawing an income, will have their annual income reduced by the period of inability to work. This pro-rated income will be used in determining the patient's eligibility for financial assistance.  
Example: The income of a patient with an annual income of \$40,000 who is unable to work for 12 weeks will have a pro-rated annual income of \$30,000 for the purposes of determining eligibility for financial assistance.
- 8) In instances when the patient states that the above supporting documentation does not exist, the patient will be required to provide a signed and dated statement attesting to their income.

### Unemployment Documentation:

- 1) North Carolina Employment Security Commission documents, if receiving unemployment income
- 2) Letters from state and local agencies on their letterhead
- 3) If a patient does not have any income, they must provide a letter of support, signed and dated, from the person who provides for their daily living needs.
- 4) In the absence of any of the above, patients who are unemployed are required to show documentation of how rent and/or utility expenses are paid.

### Calculations to determine income:

- 1) Add the ending balances of all current month banking accounts including checking, savings, money market, etc. for all adults in the household. Subtract reserve allowance, in accordance with the North Carolina resource allowance, of \$3000 for families and \$2000 for household size of one (1). Add the remaining balance to annual income.
- 2) Money Markets, Stocks, Bonds, and Certificates of Deposit - Add 100% of value toward annual income.
- 3) Individual Retirement Accounts – add any withdrawals or disbursements to annual income.
- 4) All sources of income such as pay wages, retirement accounts, pension, Social Security Disability (SSD), Supplement Security Income (SSI), self-employment income, and Veterans Benefits – Add to annual income.
- 5) Rental Income – add rental income to annual income.
- 6) Owned property other than primary residence – add current year property tax value to annual income. If timeshare property count 15% of the purchase price on the deed to annual income.

Calculate annual income using a Gregorian calendar as follows:

- Weekly X 52.1775
- Biweekly X 26.0887
- Monthly X 12
- Annually X 1

### Expense and liability calculation to adjust annual income:

- 1) Reduce income by a standard expense and liability allowance of 6% of calculated income.

## Appendix C: Requirement Definitions for Financial Assistance

### Family Size

*Family Size* - A family is a group of two or more persons related by birth, marriage, or adoption that live together. All such related persons are considered as members of one family. Family members are defined as follows:

- 1) The patient and, if married, his/her spouse
- 2) Any natural, or adopted minor child of the patient, or spouse who has not been emancipated by a court and who is not, or has never been, married
- 3) Any minor for whom the patient or patient's spouse has been given the legal responsibility by a court
- 4) Any person designated as "dependent" on the patient's latest tax return
- 5) Any student over 18 years old who is dependent on the patient's family income for over 50 percent support
- 6) Any other person dependent on the patient's family income for over 50 percent support
- 7) Any minor child of a minor who is solely, or partially, supported by the minor who is a member of the patient's family

One of the following documents that contain the patient or patient's spouse name determines dependency:

- 1) Current tax return
- 2) Court-ordered guardian/conservatorship
- 3) Birth certificate
- 4) Baptismal record
- 5) Social Security award letter
- 6) U.S. Immigration documentation
- 7) In the absence of any of the above, a signed notarized affidavit from the patient attesting to the dependency of minor child or other family member
- 8) A minor is one who has not reached his/her eighteenth (18th) birthday and who is not and has never been married. When the marital status of the minor cannot be determined, or when there is no documentation indicating the patient is an emancipated minor, the parents or legal guardian should be designated as the responsible party. The parents or guardian's income and residence should be used to determine eligibility for financial assistance. Legal guardianship must be supported by fully executed and valid legal documents.

Proof of family size will be based on the most current filed Federal Tax form in accordance with the IRS tax laws. A birth certificate(s) must be presented to validate an increase in the family unit above the total claimed on the most recent tax return. If no tax return is provided, legal documentation of dependency as outlined above will be required or the family size will be calculated as one (1).

## Appendix D-1: UNC Hospitals

### 1. Providers at UNC Hospitals that **are** covered by the FAP

Generally, all health care providers evaluating and treating patients at UNC Hospitals honor the FAP. Any exceptions will be identified below.

### 2. Providers at UNC Hospitals that **are not** covered by and **do not** honor the FAP

Ambulance and other services providing transportation to and from UNC Hospitals, other than Carolina AirCare. For example, ambulance services provided by local governments, private ambulance companies, or other health systems are not included in the FAP.

Medical transportation services provided by entities other than Carolina AirCare, such as JAS, Elite Medical Transport, First Choice Medical, North State, and Samaritan Ambulance Service

Women's Birth and Wellness Center, and all midwives associated with the Women's Birth and Wellness Center

Outside laboratories that provide laboratory reference testing

Dentists from the School of Dentistry at the University of North Carolina at Chapel Hill

Dr. Steven Spillers, who may provide neurology services by reading Intra Operative Monitoring outside of regular business hours

Providers providing Home Hospice services

Providers providing Home Infusion services

Providers providing Durable Medical Equipment ("DME") to patients

Providers providing Home Health services

Atlantic Prosthetic and Orthotics who provides prosthetic and orthotic services

**Please note** that for all providers identified in Section 2 above, the patient may receive a separate bill for the professional and/or technical services provided.

## Appendix D-2: Rex Hospital

### 1. Providers at Rex Hospital that **are** covered by the FAP

These providers follow this Financial Assistance Policy when they provide professional services at Rex Hospital or any of the locations listed in Section 1:

- North Carolina Heart and Vascular
- Rex Cardiac Surgical Specialists
- Rex Ear, Nose & Throat Specialists
- Rex Ear, Nose & Throat Specialists at Wakefield
- Rex Hematology Oncology Associates
- Rex Hospitalists
- Rex Neonatologists
- Rex Neurosurgery and Spine Specialists
- Rex Palliative Care Specialists
- Rex Pulmonary Specialists
- Rex Surgical Specialists
- Rex Thoracic Surgical Specialists
- Rex Vascular Specialists
- UNC School of Medicine Faculty Physicians (Some Neonatologists, Radiation Oncologists, and Psychiatrists)

In addition to Rex Hospital, all other departments of Rex Hospital, except those listed in Section 2 below, follow this Financial Assistance Policy, including but not limited to, Rex Express Cares, Rex Outpatient Rehabilitation/Therapy, Rex Infusion, Rex Diabetes Education, Rex Nutrition Services, Rex Pain Management, Rex Sleep Disorder Centers, Rex Wound Healing Centers, Rex Breast Care Center, Rex Laboratory Services, and Rex Diagnostic Services.

### 2. Providers at Rex Hospital that **are not** covered by and **do not** honor the FAP

You may receive care from physicians and other providers in the community who have privileges to provide care to you at Rex Hospital but are not listed in section 1. These physicians and other providers **do not** follow our Financial Assistance Policy, even when they provide care at Rex Hospital.

Additionally, Rex Hospital provides certain services through independent contractors who **do not** follow this Financial Assistance Policy such as

- Raleigh Emergency Medicine Associates - emergency room physicians, nurse practitioners, and physician assistants
- OBHG North Carolina, P.C. (Rex OB ED Hospitalists)
- American Anesthesiology of North Carolina PLLC, for the professional services of your anesthesia providers
- Wake Radiology Consultants, for the professional services of interpreting your radiology test(s)
- Rex Pathology Associates, PA for the laboratory services of evaluating your specimen(s)
- Psychiatrists
- Pain Management Physicians

Finally, the following locations do not follow this Financial Assistance Policy:

- Rex Rehabilitation and Nursing Care Center (Raleigh)
- Rex Rehabilitation and Nursing Care Center of Apex



Please note that for all providers identified in Section 2 above, the patient may receive a separate bill for the professional and/or technical services provided.

## Appendix D-3: Chatham Hospital

### 1. Providers at Chatham Hospital that **are** covered by the FAP

Generally, all health care providers evaluating and treating patients at Chatham Hospital honor the FAP. Any exceptions will be identified below.

### 2. Providers at Chatham Hospital that **are not** covered by and **do not** honor the FAP

Ambulance and other services providing transportation to and from Chatham Hospital, other than Carolina AirCare. For example, ambulance services provided by local governments, private ambulance companies, or other health systems are not included in the FAP.

Medical transportation services provided by entities other than Carolina AirCare, such as JAS, Elite Medical Transport, First Choice Medical, North State, and Samaritan Ambulance Service

Dr. Ajay Ajmani, Rheumatology

Pediatricians from Chatham Pediatrics

Dr. Frank Hancock, Pathology

Podiatrists from Greensboro Podiatry

Elizabeth Anton, PsyD

All radiologists from Greensboro Radiology providing radiology services

All dentists providing dental services

Orthopaedic surgeons from Central Carolina Orthopaedics

Ashley Walker, NP

William Scott Boyd, PA

Aaron Freuler, PA

Charles Pulliam, PA

Outside laboratories that provide laboratory reference testing

Providers providing Home Hospice services

Providers providing Home Infusion services

Providers providing Durable Medical Equipment (“DME”) to patients

Providers providing Home Health services

Please note that for all providers identified in Section 2 above, the patient may receive a separate bill for the professional and and/or technical services provided.

## Appendix D-4: Caldwell Memorial Hospital

### 1. Providers at Caldwell Memorial Hospital that **are** covered by the FAP

Anderson Medical Park  
Blowing Rock Medical Park  
Digestive Health Center  
Foothills Dialysis Access  
Laurel Park Women's Health  
Mulberry Pediatrics  
PLUS Urgent Care  
Robbins Cardiology  
Robbins Ear, Nose, Throat & Allergy  
Robbins Medical Park  
Robbins Pulmonology  
Robbins Surgical  
Southfork Medical Park  
The Falls Medical Park  
The Falls Pediatrics  
Westpointe Medical Practice  
Caldwell Acute Care Specialists

### 2. Providers at Caldwell Memorial Hospital that **are not** covered by and **do not** honor the FAP

Ambulance and other services providing transportation to and from Caldwell Memorial Hospital. For example, ambulance services provided by local governments, private ambulance companies, or other health systems are not included in the FAP.

Medical transportation services  
Caldwell Community Pharmacy  
HealthWorks  
Quest4Life Wellness Center  
Unifour Anesthesia Associates, P.A.  
Catawba Radiological Associates  
Caldwell Emergency Physicians, P.A.  
Piedmont Pathology

## **Appendix D-5: Johnston Health Services Corporation**

### **1. Providers at Johnston Health that **are** covered by the FAP**

These providers follow this Financial Assistance Policy when they provide professional services at Johnston Health Services Corporation or any of the locations also listed in this Section 1:

- Johnston Hospitalists
- Johnston Medical Associates Clayton
- Johnston Medical Associates Kenly
- Johnston Medical Associates Internal Medicine
- Johnston Medical Associates Urgent Care
- Johnston Medical Associates Specialty Clinic
- Any UNC School of Medicine Faculty Physicians

In addition to Johnston Health Services Corporation, all other departments of Johnston Health Services Corporation, except those listed in Section 2 below, follow this Financial Assistance Policy.

### **2. Providers at Johnston Health that **are not** covered by and **do not** honor the FAP**

You may receive care from physicians and other providers in the community who have privileges to provide care to you at Johnston Health Services Corporation but are not listed in Section 1 above. These physicians and other providers **do not** follow our Financial Assistance Policy, even when they provide care at Johnston Health.

Additionally, Johnston Health provides certain services through independent contractors who **do not** follow this Financial Assistance Policy. For example, these providers do not follow this Financial Assistance Policy:

- Emergency room physicians, nurse practitioners, and physician assistants
- Anesthesiologists and certified registered nurse anesthetists (CRNAs)
- Pathologists
- Radiologists
- Psychiatrists

Please note that for all providers identified in Section 2 above, the patient may receive a separate bill for the professional and/or technical services provided.

## Patient Financial Assistance

### Appendix D-6: UNC Rockingham Hospital

#### 1. Providers at UNC Rockingham Hospital that are covered by the FAP

These providers follow this Financial Assistance Policy when they provide professional services at UNC Rockingham Hospital:

UNC Family Medicine at Eden  
UNC Neurosurgery at Eden  
UNC Orthopedics & Sports Medicine at Eden  
UNC Surgical Specialist at Eden  
UNC Urgent Care – West Rockingham  
UNC Women's Health at Eden

#### 2. Providers at UNC Rockingham Hospital that are not covered by and do not honor the FAP

You may receive care from physicians and other providers in the community who have privileges to provide care to you at UNC Rockingham Hospital but **do not** follow our Financial Assistance Policy, even when they provide care at UNC Rockingham Hospital.

Additionally, UNC Rockingham provides certain services through independent contractor who **do not follow** this Financial Assistance Policy. For example, these providers do not follow our Financial Assistance Policy:

Emergency room physicians, nurse practitioners and physicians' assistance, including providers with The Schumacher Clinical Partners  
Anesthesiologists and Certified Registered Nurse Anesthetists (CRNAs)  
Physicians providing Wound Healing services  
Radiologists, including physicians with Greensboro Radiology  
Pathologists  
Outside laboratories that provide laboratory reference testing  
Ambulance and other services providing transportation to and from UNC Rockingham Hospital  
UNC Rockingham Rehabilitation & Nursing Care Center

**Please note that for all providers identified in Section 2 above, the patient may receive a separate bill for the professional and /or technical services provided.**

## Appendix D-7: Nash UNC Health Care

### 1. Providers at Nash UNC Health Care that **are** covered by the FAP

Generally, all health care providers evaluating and treating patients at Nash UNC Health Care honor the Financial Assistance Policy. Any exceptions will be identified below.

### 2. Providers at Nash UNC Health Care that **are not** covered by and **do not** honor the FAP

You may receive care from physicians and other providers in the community who have privileges to provide care to you at Nash UNC Health Care, but are not listed in Section 1 above.

These physicians and other providers do not follow our Financial Assistance Policy, even when they provide care at Nash UNC Health Care.

Additionally, Nash UNC Health Care provides certain services through independent contractors who do not follow this Financial Assistance Policy. For example, these providers do not follow this Financial Assistance Policy:

Emergency room physicians, nurse practitioners, and physician assistants

Anesthesiologists and certified registered nurse anesthetists (CRNAs)

Pathologists

Radiologists

Please note that for all providers identified in Section 2 above, the patient may receive a separate bill for the professional and/or technical services provided.

## Appendix D-8: Wayne UNC Health Care Hospital

### 1. Providers at Wayne UNC Health Care that **are** covered by the FAP

- Eskra Plastic Surgery – Goldsboro & Kinston
- Rex Wayne Hospitalists
- Specialty Care at Goldsboro (Futch, McLamb, Okeke)
- UNC Anesthesiology
- UNC Ear, Nose and Throat at Goldsboro
- UNC Family Medicine at Goldsboro, Pikeville and Rosewood
- UNC Internal Medicine at Goldsboro
- UNC Neurosurgery at Goldsboro
- UNC Orthopedics at Goldsboro
- UNC Primary Care at Goldsboro
- UNC Psychiatry at Goldsboro
- UNC Surgical Specialists at Goldsboro
- UNC Urology at Goldsboro
- UNC Women's Health
- UNC Vascular Specialists at Goldsboro

### 2. Providers at Wayne UNC Health Care that **are not** covered by and **do not** honor the FAP

- Carolina Internal Medicine and Pediatrics
- Carolina Kidney & Vascular
- Carolina Nephrology
- Digestive Disease Center
- Eastern Carolina Oral & Maxi
- Eastern Medical Associates, PA
- Eastern Regional Pain Specialists
- ECU Physicians
- Goldsboro Emergency Med Specialists
- Goldsboro Eye Clinic
- Goldsboro Medical Center (Dugom)
- Goldsboro Medical Specialists
- Goldsboro OB-GYN Associates
- Goldsboro Pediatric Dentistry and Orthodontics
- Goldsboro Pediatrics

- Goldsboro Quick Care
- Goldsboro Skin Center
- Highgate Clinic, PA
- Immediate Care
- Kinston Head & Neck Physicians & Surgeons
- Kinston Pathology Associates
- Kinston Urological Associates, PA
- Medical Care Family Practice
- Mount Olive Family Medicine Center
- North Carolina Heart & Vascular
- Pathology Associates of Kinston
- Prime Care Physicians
- Sampson Radiation Oncology, PA
- Southeastern Medical Oncology Center
- Wayne Family Medical Center (Bhatti)
- Wayne Heart & Internal Medicine, PA
- Wayne Radiation Oncology Center
- Wayne Radiologists, P.A.
- Wayne Women's Clinic
- Waynesborough Ophthalmology
- Western Wayne Medical Center



## **Appendix D-9: Lenoir Hospital**

### 1. Providers at Lenoir Hospital that **are** covered by the FAP

Generally, all health care providers evaluating and treating patients at Lenoir Hospital honor the FAP. Any exceptions will be identified below.

### 2. Providers at Lenoir Hospital that are not covered by and do not honor the FAP

- Ambulance and other services providing transportation to and from Lenoir Hospital. For example, ambulance services provided by local governments, private ambulance companies, or other health systems are not included in the FAP.
- Medical transportation services
- Outside laboratories that provide laboratory reference testing
- Providers providing Home Health, Hospice, and Infusion services
- American Anesthesiology
- Kinston Physician Group, PLLS who provides emergency room physician services.
- Kinston Pathology Associates
- Eastern Radiologists, Inc.
- Vidant Medical Group who provides hospitalist services
- Down East Medical Supply, or any provider that provides Durable Medical Supplies (DME) to patients.

## Appendix D-10: Blue Ridge HealthCare System, Inc.

### 1. Providers at Blue Ridge HealthCare System, Inc. that **are** covered by the FAP

Generally, all health care providers evaluating and treating patients at Blue Ridge HealthCare System, Inc. honor the FAP. Exceptions identified below in section 2.

### 2. Providers at Blue Ridge HealthCare System, Inc. that **are not** covered by and **do not** honor the FAP

You may receive care from physicians and other providers in the community who have privileges to provide care to you at Blue Ridge Healthcare System, Inc., but are not listed in Section 1 above.

These physicians and other providers do not follow our Financial Assistance Policy, even when they provide care at Blue Ridge Healthcare System, Inc.

Additionally, Blue Ridge HealthCare System, Inc. provides certain services through independent contractors who do not follow this Financial Assistance Policy. For example, these providers do not follow this Financial Assistance Policy:

- Ambulance and other services providing transportation to and from Blue Ridge HealthCare System. For example, ambulance services provided by local governments, private ambulance companies, or other health systems are not included in the FAP.
- Medical transportation services
- Outside laboratories that provide laboratory reference testing
- Pathology
- Providers providing Home Health, Home Hospice, and Home Infusion services
- Providers providing Durable Medical Equipment (DME) to patients
- Psychiatrists
- Surgical Assistants
- Midwives
- Nursing Homes
- LabCorp

Please note that for all providers identified in Section 2 above, the patient may receive a separate bill for the professional and/or technical services provided.

## **Appendix D-11: Southeastern Regional Medical Center**

### 1. Providers at Southeastern Regional Medical Center that are covered by the FAP

Generally, all health care providers evaluating and treating patients at Southeastern Regional Medical Center honor the FAP. Exceptions identified below in section 2.

#### **Primary Care Clinics**

Lumberton Medical Clinic  
395 W. 27<sup>th</sup> Street, Lumberton

Southeastern Health Center Clarkton  
9948 North WR Latham St., Clarkton

Southeastern Medical Clinic Fairmont  
101 N. Walnut St., Fairmont

Southeastern Medical Clinic Gray's Creek  
1249 Chicken Foot Rd., Hope Mills

Southeastern Medical Clinic N. Lumberton  
725 Oakridge Blvd., Suite 82, Lumberton

Southeastern Medical Clinic Maxton  
22401 Andrew Jackson Hwy., Maxton

Southeastern Medical Clinic Red Springs  
302 Mt. Tabor Rd., Red Springs

Southeastern Medical Clinic Rowland  
102 N. Bond St., Rowland

Southeastern Medical Clinic St. Paul's  
128 E. Broad St., St. Paul's

Southeastern Medical Clinic White Lake  
1921 White Lake Dr., Elizabethtown

Southeastern Medical Specialists  
4384 Fayetteville Rd., Lumberton

#### **Specialty Clinics**

Diabetes Community Center  
2934 N. Elm St., Suite G, Lumberton

Lumberton Urology Clinic  
815 Oakridge Blvd., Lumberton

Southeastern Digestive Health Center  
725 Oakridge Blvd., Suite C-1, Lumberton

Southeastern Family Medicine Residency Clinic  
730 Oakridge Blvd., Lumberton

Southeastern Health Women's Clinic  
295 W. 27<sup>th</sup> St., Lumberton

Southeastern Occupational Health Works  
725 Oakridge Blvd., Suite a 3, Lumberton

Southeastern Lifestyle Rehab  
4895 Fayetteville Rd., Lumberton

Southeastern Pulmonary and Sleep Clinic  
401 W 27<sup>th</sup> St. Lumberton

Southeastern Radiology Associates  
209 W. 27<sup>th</sup> St., Lumberton

Southeastern Sleep Center  
Two Locations:  
300 W. 27<sup>th</sup> St., Lumberton  
290-A Corporate Dr., Lumberton

Southeastern Surgical Center  
2934 N. Elm St., Suite E, Lumberton

Southeastern Health Mall Clinic  
2934 N. Elm St., Suite B, Lumberton

Southeastern Women's Healthcare  
4300 Fayetteville Rd., Lumberton

Southeastern Women's Healthcare at the Oaks  
800 Oakridge Blvd., Lumberton

The Clinic at Lumberton Drug  
4307 Fayetteville Rd., Lumberton

Coastal Radiology  
Robeson Emergency Physicians  
Medstream Anesthesia  
Apollo Physician Group

2. Providers at Southeastern Regional Medical Center that **are not** covered by and **do not** honor the FAP

You may receive care from physicians and other providers in the community who have privileges to provide care to you at Southeastern Regional Medical Center, but are not listed in Section 1 above.

These physicians and other providers do not follow our Financial Assistance Policy, even when they provide care at Southeastern Regional Medical Center.

**Only visits are covered at the below clinics. Providers are independent contractors and their services are not covered under this policy:**

Southeastern Cardiology  
2936 N. Elm St., Suites 102 and 103, Lumberton

Gibson Cancer Center  
1200 Pine Run Drive, Lumberton

Northstar Internal Medicine Clinic at Gibson Cancer Center  
1200 Pine Run Drive, Lumberton

Southeastern Arthritis Center  
4901 Dawn Drive, Suite 3400, Lumberton

Southeastern Neurology Center  
4901 Dawn Drive, Suite 3000, Lumberton

Southeastern Spine and Pain  
4901 Dawn Drive, Suite 3300, Lumberton

Southeastern Wound Healing Center  
103 W. 27<sup>th</sup> St., Lumberton

The Surgery Center  
4901 Dawn Dr., Suite 1100, Lumberton

Southeastern Multi-Specialty and Urgent Care Pembroke (\*Urgent Care services only)  
923 West 3<sup>rd</sup> St., Pembroke

Additionally, Southeastern Regional Medical Center provides certain services through independent contractors who do not follow this Financial Assistance Policy. For example, these providers do not follow this policy:

- Ambulance and other services providing transportation to and from Southeastern Regional Medical Center. For example, ambulance services provided by local governments, private ambulance companies, or other health systems are not included in the FAP.
- Medical transportation services
- Outside laboratories that provide laboratory reference testing

- Pathology
- Providers providing Home Health, Home Hospice, and Home Infusion services
- Providers providing Durable Medical Equipment (DME) to patients
- Psychiatrists
- Surgical Assistants
- Midwives
- Nursing Homes

Please note that for all providers identified in Section 2 above, the patient may receive a separate bill for the professional and/or technical services provided.

## Appendix D-12: Margaret R. Pardee Memorial Hospital

### 1. Providers at Margaret R. Pardee Memorial Hospital that **are** covered by the FAP

Generally, all health care providers evaluating and treating patients at Margaret R. Pardee Memorial Hospital honor the FAP. Exceptions identified below in section 2.

### 2. Providers at Margaret R. Pardee Memorial Hospital that **are not** covered by and **do not** honor the FAP

You may receive care from physicians and other providers in the community who have privileges to provide care to you at Margaret R. Pardee Memorial Hospital, but are not listed in Section 1 above.

These physicians and other providers do not follow our Financial Assistance Policy, even when they provide care at Margaret R. Pardee Memorial Hospital – Physician not employed with UNC Pardee Healthcare.

Additionally, Margaret R. Pardee Memorial Hospital provides certain services through independent contractors who do not follow this Financial Assistance Policy. For example, these providers do not follow this Financial Assistance Policy:

- Ambulance and other services providing transportation to and from Margaret R. Pardee Memorial Hospital. For example, ambulance services provided by local governments, private ambulance companies, or other health systems are not included in the FAP.
- Medical transportation services
- Outside laboratories that provide laboratory reference testing
- Pathology
- Anesthesia
- Radiology
- Providers providing Home Health, Home Hospice, and Home Infusion services
- Providers providing Durable Medical Equipment (DME) to patients
- Psychiatrists
- Midwives
- Nursing Homes
- UNC Pardee Urgent Care
- Orthopedics – Emerge Ortho
- Pardee Blue MD all locations

Please note that for all providers identified in Section 2 above, the patient may receive a separate bill for the professional and/or technical services provided.

## Patient Financial Assistance Policy

### Appendix E

#### NOTICE OF NONDISCRIMINATION

UNC Health and its affiliated Network Entities comply with applicable Federal civil rights laws and do not discriminate, exclude people, or treat them differently on the basis of race, color, national origin, age, disability, or sex.

To review our complete Non Discrimination Notice, please visit:

<https://www.unhealthcare.org/app/files/public/b3c9eacb-573e-40b7-8aa4-64dc25e40fd7/pdf-system-unc-health-care-nondiscrimination-notice.pdf>. This notice may also be accessed through a link ("[Nondiscrimination Notice](#)") at the bottom of the UNC Health Internet site <https://www.unhealthcare.org/>.



**Appendix H**  
**Uninsured Discount and Financial Assistance Decision Matrix**

Scenario		Bill Insurance	Pre-Payment at Scheduling	40% Uninsured Discount	Financial Assistance Adjustment
1	OON (Out of Network) Insurance	Y	Y	N	N
2	Patient Opts out of billing insurance and/or release of PHI. *	N	Y	N	N

*\*Excludes government payers (Medicare, Managed Medicare PHPs, Medicaid, and Managed Medicaid PHPs)*



## **Charter of the Financial Oversight Committee**

### **Purpose:**

The purpose of the Financial Assistance Oversight Committee (FAOC) is to govern all aspects of the patient financial assistance program, including but not limited to pharmacy financial assistance, transplant financial assistance, international patient request's and Out of State Medicaid/Out of Network Plan financial policies. This committee serves in this capacity for the entire health care system – both owned and managed entities.

### Relevant Regulatory Factors

*Patient Protection and Affordable Care Act P.L. No. 111-148*

*Internal Revenue Code Section 501(r)*

*Internal Revenue Code Section 501(c)(3)*

### **Specific Responsibilities and Duties:**

The committee is responsible for addressing relevant financial issues impacting financial resources and health services for UNC Health patient care. The committee provides oversight, insight, and approval of proposed revisions to the Patient Financial Assistance policy. In addition, the committee is responsible for oversight of the HCS financial assistance program including monitoring statistics, application workflow, communications and assuring compliance with relevant and applicable laws and regulations.

### **Composition and Structure:**

The Committee is comprised of senior health care system administrative leaders from owned entities including UNC Hospitals and Rex, as well as the Faculty Practice and two representatives from managed entities.

Static Voting Members include: Chief Revenue Officer (Chair); HCS Chief Financial Officer; Chief Clinical Officer, Chief Medical Officer, President Faculty Physicians, President UNC Physicians, Chief Marketing Officer, Deputy Chief Operating Officer, Associated Chief Financial Officer, Associate Chief Financial Officer (Managed Entities), Chief Financial Officer UNC Hospitals, Chief Financial Officer Rex Hospital, 1 appointed Chief Financial Officer Managed Entities, 1 appointed Chief Executive Officer Managed Entities.

Additional members to be appointed by the nominating committee which shall be comprised of the Chair (Chief Revenue Officer), HCS Chief Financial Officer, Chief Clinical Officer and the President Faculty Physicians. Such members may include but not be limited with representation



from legal, the Faculty Practice, the University, compliance, finance or revenue cycle operations.

**Meeting Cadence:**

The Financial Oversight Committee meets bi-monthly or as frequently as necessary to review escalated financial assistance requests. The FAOC agenda and pre-reads will be made available in advance of the meeting. Meeting minutes will be approved by the Committee and maintained on behalf of the Committee. The Committee shall report its activities to the FAOC on a regular basis and make such recommendation as it deems necessary or appropriate.

**Annual Performance Evaluation and Charter Review**

Annually and as necessary, there shall be a performance evaluation of the Committee, which may include a self-evaluation or evaluation of procedures, nominating members, and governance, as the Committee deems appropriate.