

**Texas Nonprofit Hospitals \***  
**Part II**  
**Summary of Current Hospital Charity Care Policy and Community Benefits**  
**for Inclusion in DSHS Charity Care Manual as Required**  
**by Texas Health and Safety Code, § 311.0461\*\***

-2014-

**Facility Identification (FID):** 2153723 (Enter 7-digit FID# from attached hospital listing)\*\*\*

**Name of Hospital:** Knapp Medical Center **County:** Hidalgo

**Mailing Address:** P.O. Box 659830 Msc #100, San Antonio, TX 78265-9130

**Physical Address if different from above:** 1401 E. 8th St., Weslaco, TX 78596

**Effective Date of the current policy:** 01/01/2013

**Date of Scheduled Revision of this policy:** 02/01/2014

**How often do you revise your charity care policy?** Annual

**Provide the following information on the office and contact person(s) processing requests for charity care.**

Name of the office/department: Business Services

Mailing Address: P.O. Box 659830 Msc #100, San Antonio, TX 78265-9130

Contact Person: Juan Hernandez Title: Coordinator - Business Services

Phone: (956) 969-5140 Fax: (956) 969-1408 E-Mail: jhernandez5@primehealthcare.com

Person completing this form if different from above:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

\* This summary form is to be completed by each **nonprofit** hospital. Hospitals in a system must report on an individual hospital basis. Public hospitals, for-profit hospitals participating in the Medicaid disproportionate share hospital program and exempt hospitals are not required to complete this form. This form is only available in PDF format at DSHS web site: [www.dshs.state.tx.us/chs/hosp](http://www.dshs.state.tx.us/chs/hosp) under 2014 Annual Statement of Community Benefits Standard.

\*\* The information in the manual will be made available for public use. Please report most current information on the charity care policy and community benefits provided by the hospital.

\*\*\* The list is also available on DSHS web site: [www.dshs.state.tx.us/chs/hosp/](http://www.dshs.state.tx.us/chs/hosp/).

**I. Charity Care Policy:**

1. Include your hospital's Charity Care Mission statement in the space below.

A significant component of Knapp Medical Center is to provide care for patients in times of need. Knapp Medical Center provides charity care as a benefit to the community we serve as a not-for-profit hospital. To this end, Knapp Medical Center is committed to assisting low-income and/or uninsured eligible patients with appropriate discount payment and charity care programs. All patients will be treated fairly, with compassion and respect.

2. Provide the following information regarding your hospital's current charity care policy.

a. Provide definition of the term **charity care** for your hospital.

Patients who lack insurance or have inadequate insurance and meet certain low and moderate-income requirements may qualify for discounted payments or charity care. The patient balances for those patients who qualify to participate in the Charity Care Program, as determined by the hospital, shall be reduced to a sum equal to \$0 with the remaining balance eliminated and classified as charity care.

b. What percentage of the federal poverty guidelines is financial eligibility based upon?

Check one.

1. <100%

4. <200%

2. <133%



5. Other, specify 350%

3. <150%

c. Is eligibility based upon net or  gross income? Check one.

d. Does your hospital have a charity care policy for the Medically Indigent?

YES NO IF yes, provide the definition of the term **Medically Indigent**.

A medically indigent patient is determined by the cost of health care services provided versus the income of the guarantor's income.

e. Does your hospital use an Assets test to determine eligibility for charity care?

YES  NO If yes, please briefly summarize method.

f. Whose income and resources are considered for income and/or assets eligibility determination.

1. Single parent and children

2. Mother, Father and Children

3. All family members



4. All household members

5. Other, please explain \_\_\_\_\_

g. What is included in your definition of income from the list below? Check all that apply.

- 1. Wages and salaries before deductions
- 2. Self-employment income
- 3. Social security benefits
- 4. Pensions and retirement benefits
- 5. Unemployment compensation
- 6. Strike benefits from union funds
- 7. Worker's compensation
- 8. Veteran's payments
- 9. Public assistance payments
- 10. Training stipends
- 11. Alimony
- 12. Child support
- 13. Military family allotments
- 14. Income from dividends, interest, rents, royalties
- 15. Regular insurance or annuity payments
- 16. Income from estates and trusts
- 17. Support from an absent family member or someone not living in the household
- 18. Lottery winnings
- 19. Other, specify \_\_\_\_\_

3. Does application for charity care require completion of a form?  YES NO

If YES,

a. **Please attach a copy of the charity care application form.**

b. How does a patient request an application form? Check all that apply.

- 1. By telephone
- 2. In person
- 3. Other, please specify \_\_\_\_\_

c. Are charity care application forms available in places other than the hospital?

YES  NO If, YES, please provide name and address of the place.

d. Is the application form available in language(s) other than English?

YES NO

If yes, please check

Spanish  Other, please specify \_\_\_\_\_

4. When evaluating a charity care application,

a. How is the information verified by the hospital?

- 1. The hospital independently verifies information with third party evidence (W2, pay stubs)
- 2. The hospital uses patient self-declaration
- 3. The hospital uses independent verification and patient self-declaration

b. What documents does your hospital use/require to verify income, expenses, and assets? Check all that apply.

- 1. W2-form
- 2. Wage and earning statement
- 3. Pay check remittance
- 4. Worker's compensation
- 5. Unemployment compensation determination letters
- 6. Income tax returns
- 7. Statement from employer
- 8. Social security statement of earnings
- 9. Bank statements
- 10. Copy of checks
- 11. Living expenses
- 12. Long term notes
- 13. Copy of bills
- 14. Mortgage statements
- 15. Document of assets
- 16. Documents of sources of income
- 17. Telephone verification of gross income with the employer
- 18. Proof of participation in govt assistance programs such as Medicaid
- 19. Signed affidavit or attestation by patient
- 20. Veterans benefit statement
- 21. Other, please specify \_\_\_\_\_

5. When is a patient determined to be a charity care patient? Check all that apply.

- a. At the time of admission
- b. During hospital stay
- c. At discharge
- d. After discharge
- e. Other, please specify \_\_\_\_\_

6. How much of the bill will your hospital cover under the charity care policy?
- a. 100%
  - b. A specified amount/percentage based on the patient's financial situation
  - c. A minimum or maximum dollar or percentage amount established by the hospital
  - d. Other, please specify \_\_\_\_\_
7. Is there a charge for processing an application/request for charity care assistance?
- YES  NO
8. How many days does it take for your hospital to complete the eligibility determination process? 31
9. How long does the eligibility last before the patient will need to reapply? Check one.
- a. Per admission
  - b. Less than six months
  - c. One year
  - d. Other, specify \_\_\_\_\_
10. How does the hospital notify the patient about their eligibility for charity care?  
Check all that apply?
- a. In person
  - b. By telephone
  - c. By correspondence
  - d. Other, specify \_\_\_\_\_
11. Are all services provided by your hospital available to charity care patients?
- YES NO
- If NO, please list services not covered for charity care patients (e.g. transplant services, ER services, other outpatient services, physician's fees).
12. Does your hospital pay for charity care services provided at hospitals owned by others?
- YES  NO

## **II. Community Benefits Projects/Activities:**

Provide information on name, brief description (3 lines), target population or purpose (3 lines) for each of the community benefits projects/activities CURRENTLY being undertaken by your hospital (example: diabetes awareness).

The Wellness Program offers lab screenings from \$5-\$30 to encourage healthy lifestyles. This was developed as an alternative for those without health insurance who could not otherwise afford expensive tests. Valley Health Seminars are given by local physicians on different health topics. Topics are usually geared for older adults, but some are designed for parents. Seminars are held in person and archived for access by a broader audience. More than 130 local residents took advantage of these free education opportunities. The Volunteer Program assists students needing volunteer hours to enter certain professional healthcare classes and for older adults who need to feel a sense of purpose. The hospital patients and staff benefit greatly from volunteer efforts as well. The Junior Volunteer program gives students 15-18 years of age an opportunity to embrace volunteering and learn about potential health careers. Fit & Fun Fall Festival is a free, general health fair held near Halloween. Held after school, it is geared mainly for families with children. More than 1,000 local parents and children attended the event, during which Knapp Medical Center offers free information on healthy living as well as a number of free health screenings, including blood pressure checks, glucose screenings, grip strength assessments, and more. To help promote breast cancer awareness and the importance that early detection plays in the fight against breast cancer, Knapp Medical Center annually hosts its own Bras Ending Breast Cancer campaign. Held in early October, decorated bras are displayed and educational information is distributed during a number of events. In addition to offering free information on breast health, the event raises funds to provide screening mammograms for local indigent women. Bras Ending Breast Cancer raised nearly \$1,650, enough to provide screening mammograms for 13 local indigent women. Since September 2009, Knapp Medical Center's Trauma Services has distributed more than 216 infant and booster seats to indigent families. To be eligible for a seat, the parent must receive training on proper car seat installation and how to correctly fit child harnesses. Childbirth Education Classes are held for expectant parents, and each year Knapp Medical Center serves as an inspection station for the Safe Riders car seat inspection program. As part of the program, Knapp offers local parents the opportunity to have car seats they own inspected. If an inspected car seat is found to be damaged or on a recall list, parents are provided a new car seat free of charge. In conjunction with Victoria Palms First Responders, Knapp held coordinate the annual Senior Health Fair. During the event, which is geared toward local seniors and visiting winter Texans, participants are offered free health information on a wide array of subjects, in addition to free health screenings, including blood pressure checks, glucose screenings, body mass index tests and more. Offered in January 2013, more than 320 seniors attended the free event. Dieticians taught diabetes and renal failure patients portion control and meal planning using a chart that provides visual cues to food choices rather than words. This chart was printed with a grant from the Knapp Auxiliary. The Knapp Auxiliary decided that diabetes management tools were too important not to share. They took over marketing of the foot charts as an outreach project. The charts are free to Knapp dieticians and sales of the charts fund the printing of future charts. A Que Pasa quarterly community newsletter offers community health education and information on members of the Knapp Medical Center Medical Staff and the services these independent professional providers have access to at Knapp.

### **Additional Information:**

Use this space if more space is required for comments or to elaborate on any of the information supplied on this form. Please refer to the response by question and item number.

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**NOTE:** This is the twelfth year the charity care and community benefits form is being used for collecting the information required under Texas Health and Safety Code, § 311.0461. If you have any suggestions or questions, please include them in the space below or contact Dwayne Collins, Center for Health Statistics, Texas Department of State Health Services at (512) 776-7261 or fax: (512) 776-7344 or E-mail: [dwayne.collins@dshs.state.tx.us](mailto:dwayne.collins@dshs.state.tx.us).

Name of Hospital: \_\_\_\_\_ City: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Suggestions/questions:**