Ability to Pay

POLICY

It is the policy of Detroit Wayne Mental Health Authority (DWMHA) to exert all due diligence ensuring that the appropriate fees for services are collected from consumers or their responsible financial entities, as required by contract, law, and their by benefit.

PURPOSE

The purpose of this policy is to outline the practice of determining and collecting fees as determined by Ability to Pay calculations.

APPLICATION

1. The following groups are required to implement and adhere to this policy: DWMHA Board, DWMHA Staff, Contractual Staff, MCPN Staff, Network Providers,
2. This policy serves the following populations: Adults, Children, I/DD, SMI/SEI, SED, SUD, Autism
3. This policy impacts the following contracts/service lines: MI-HEALTH LINK, Medicaid.SUD, Autism, Grants, General Fund

KEYWORDS

1. Ability to Pay
2. Cost of Services
3. Financially responsible party

STANDARDS

1. Consumer access to care is not denied due to ability to pay.
2. Financial determination must be calculated no less than annually. It should be updated whenever a consumer's financial situation changes.
3. Ability to pay determinations are in place for the service year, based on the plan of service, rather than a calendar year.
4. Ability to pay determinations are calculated utilizing formulas set forth by State and Federal policy. This
includes a review of assets, income, and living expenses.

5. Individuals and their financially responsible entities have a responsibility to pay for the cost of their services within their capacity without imposition on their long-term financial obligations and/or material disturbance on their standard of living.

6. DWMHA funds are to be used as a last resort, utilizing all first and third-party insurance benefits to their fullest extent.

7. Providers will routinely make collection attempts on the determined fees, co-pays, and ability to pay charges.

8. MCPNs and Providers will utilize the standard Determination of Eligibility formula available in the DWMHA MHWIN Ability to Pay module.

9. MCPNs are responsible for ensuring they have policies in place consistent with this policy, that providers have policies consistent with this policy, and that they monitor Provider compliance with this policy.

QUALITY ASSURANCE/IMPROVEMENT

DWMHA shall review and monitor contractor adherence to this policy as one element in its network management program, and as one element of the QAPIP Goals and Objectives.

The quality improvement programs of MCPNs, their subcontractors, and direct contractors must include measures for both the monitoring of and the continuous improvement of the programs or processes described in this policy.

COMPLIANCE WITH ALL APPLICABLE LAWS

DWMHA staff, MCPNs, contractors, and subcontractors are bound by all applicable local, state and federal laws, rules, regulations and policies, all federal waiver requirements, state and county contractual requirements, policies, and administrative directives, as amended.

LEGAL AUTHORITY

1. Contract between Michigan Department of Health and Human Services Medicaid Managed Specialty Supports and Services Concurrent 1915(b)/(c) Waiver Program(s), the Healthy Michigan Program and Substance Use Disorder Community Grant Programs FY 2016

RELATED POLICIES

SUD Ability to Pay

RELATED DEPARTMENTS

1. Claims Management
2. Clinical Practice Improvement
3. Compliance
4. Customer Service
5. Legal
6. Managed Care Operations
| 7. | Management & Budget |
| 8. | Quality Improvement |
| 9. | Recipient Rights |
| 10. | Substance Use Disorders |

**CLINICAL POLICY**

**NO**

**INTERNAL/EXTERNAL POLICY**

**EXTERNAL**

**Attachments:**

No Attachments

**Approval Signatures**

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<td>Dana Lasenby: Acting Chief Executive Officer</td>
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