

Frequently Asked Questions regarding UNM Hospital Financial Assistance Programs

1) Who is eligible for a long term repayment plan and what does this mean?

UNM Hospital will offer payment plans for any patient who needs help with setting up scheduled payments for services we provide. For patients with verified income below 300% of the Federal Poverty level (\$2,970 per month for a one person household or \$5,040 for a three person household) UNMH Hospitals will manage these patient accounts internally and would not send you to collections if you have a payment plan set up. Payment plans will be established based on your individual situation.

2) How is my co-payment or out of pocket cost determined?

Co-payments are based on the Financial Assistance Program you are determined eligible for and your income level. For the UNM Care program Co-payments are defined based on where your income falls up to the program maximum of 300% for the Federal Poverty Level.

For patients on the Self Pay Discount Program you're of pocket costs are determined by the services you receive and the costs of those specific services. Patients qualifying are eligible for a 45% discount to billed charges for that service. The remaining balance may be paid by establishing a payment plan with our financial assistance office or call our office at 272-2521. Expected Co-payments are determined based on where your income level falls for the program.

3) Can I still be scheduled for an appointment for a procedure or with my provider prior to my making payment?

Yes you can schedule an appointment for needed services prior to making payments for a service.

4) What if I cannot make my co-payment or down payment for services?

If you are having difficulty making your required payments please let us know. If your service is determined to be medically necessary and urgent by your provider you will be scheduled and seen regardless of your payment status. This does not alleviate your obligation for the payment but does defer the payment until a

later date. If your provider determines that the service is not medically necessary or is not urgent at this time you may be asked to reschedule the appointment to a later time when you can make your required payments.

5) Can I establish a payment plan that includes my co-payments?

Yes you can include your required co-payments and deductibles as part of your established payment plan.

6) Is there any appeal process for decisions related to my financial assistance?

Yes you may notify Patient Financial Assistance at 272-2521 to file an appeal related to any aspect of your financial services and payment obligations. You will be provided more information and a copy of information explaining the process at that time.

7) How is affordability determined related to the requirement to obtain other available health insurance coverage?

Patients with incomes below the coverage limit for Medicaid and meeting all other Medicaid criteria will be required to apply for Medicaid coverage as a condition of receiving financial assistance. You may qualify for additional coverage in addition to your Medicaid.

For patients who do not qualify for Medicaid but that have access to other forms of health insurance through your work or spouses work, health exchange, or by other means will be asked to obtain that coverage if it is considered affordable based on your income. UNM Hospitals utilized the same methodology to determine affordability as the Affordable Care Act. We use a sliding scale income chart to determine, based on your income, what is the maximum amount you can afford to pay for health insurance. If your income is under this amount, you would not be required to apply for other forms of coverage. If you do apply for and obtain other forms of health insurance coverage, you may still qualify for financial assistance as a supplemental benefit.