



Charity Care Policy

I. Authority

The Fort Worth City Council is responsible for legislation, policy formulation, and setting the overall direction of government. This includes the approval of financial policies which establish and direct the operations of the City of Fort Worth (“City”). The City Manager is responsible for carrying out the policy directives of the City Council and managing the day-to-day operations of the executive departments, including the Financial Management Services Department (“FMS”). This policy shall be administered on behalf of the City Manager by the Chief Financial Officer/Director of FMS (“CFO”).

II. Purpose

The purpose of this policy is to document the City of Fort Worth’s commitment to providing charity care to people who have healthcare needs and are uninsured, underinsured, ineligible for a government program, or otherwise unable to pay, for medically necessary care based on their individual financial situation. This policy ensures compliance with the State of Texas constitutional requirements related to the use of public funds and affirms that all waivers serve a legitimate public purpose.

III. Policy

The City of Fort Worth (City) strives to ensure that the financial capacity of people who need healthcare services does not prevent them from seeking or receiving care. The City will provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility for financial assistance or for government assistance.

Accordingly, this written policy:

- A. Includes eligibility criteria for financial assistance - free and discounted (partial charity) care
- B. Describes the basis for calculating amounts charged to patients eligible for financial assistance under this policy
- C. Describes the method by which patients may apply for financial assistance
- D. Describes how the City will publicize the policy within the community served by the City
- E. Limits the amounts that the City will charge for emergency or other medically necessary care provided to individuals eligible for financial assistance to the amount generally billed (received by) the City for commercially insured or Medicare patients



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Charity is not considered to be a substitute for personal responsibility. Patients are expected to cooperate with the City's procedures for obtaining charity or other forms of payment or financial assistance, and to contribute to the cost of their care based on their individual ability to pay. Individuals with the financial capacity to purchase health insurance shall be encouraged to do so, as a means of assuring access to health care services, for their overall personal health, and for the protection of their individual assets.

To manage its resources responsibly and to allow the City to provide the appropriate level of assistance to the greatest number of people in need, the Fort Worth City Council establishes the following guidelines for the provision of patient charity.

IV. Glossary

For this policy, the terms below are defined as follows:

- A. Charity Care: Healthcare services that have been or will be provided but are never expected to result in cash inflows. Charity care results from a provider's policy to provide healthcare services free or at a discount to individuals who meet the established criteria.
- B. Family: Using the Census Bureau definition, a group of two or more people who reside together and who are related by birth, marriage, or adoption. According to Internal Revenue Service rules, if the patient claims someone as a dependent on their income tax return, they may be considered a dependent for purposes of the provision of financial assistance.
- C. Family Income: Family Income is determined using the Census Bureau definition, which uses the following income when computing federal poverty guidelines:
 - 1. Includes earnings, unemployment compensation, workers' compensation, Social Security, Supplemental Security Income, public assistance, veterans' payments, survivor benefits, pension or retirement income, interest, dividends, rents, royalties, income from estates, trusts, educational assistance, alimony, child support, assistance from outside the household, and other miscellaneous sources;
 - 2. Noncash benefits (such as food stamps and housing subsidies) do not count;
 - 3. Determined on a before-tax basis;
 - 4. Excludes capital gains or losses; and
 - 5. If a person lives with a family, it includes the income of all family members (non-relatives, such as housemates, do not count).



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- D. Uninsured: The patient has no level of insurance or third-party assistance to assist with meeting his/her payment obligations.
- E. Underinsured: The patient has some level of insurance or third-party assistance but still has out-of-pocket expenses that exceed his/her financial abilities.
- F. Gross charges: The total charges at the organization's fully established rates for the provision of patient care services before deductions from revenue are applied.
- G. Emergency medical conditions: Defined within the meaning of section 1867 of the Social Security Act (42 U.S.C. 1395dd).
- H. Medically necessary: As defined by the City (services or items reasonable and necessary for the diagnosis or treatment of illness or injury).

V. **Procedures**

A. Services Eligible Under This Policy

For purposes of this policy, "charity" or "financial assistance" refers to healthcare services provided by the City without charge or at a discount to qualifying patients. The following healthcare services are eligible for charity:

1. Emergency medical services provided in the out-of-hospital setting;
2. Services for a condition which, if not promptly treated, would lead to an adverse change in the health status of an individual;
3. Non-elective services provided in response to life-threatening circumstances; and
4. Medically necessary services, evaluated on a case-by-case basis at the City's discretion.

B. Eligibility for Charity

Eligibility for charity will be considered for those individuals who are uninsured, underinsured, eligible for any government health care benefit program, and who are unable to pay for their care, based upon a determination of financial need in accordance with this Policy. The granting of charity shall be based on an individualized determination of financial need, and shall not take into account age, gender, race, social or immigrant status, sexual orientation or religious affiliation. [The City shall determine whether patients are eligible to receive charity for deductibles, co-insurance, or co-payment responsibilities.]



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C. Method by Which Patients May Apply for Charity Care

Financial need will be determined in accordance with procedures that involve an individual assessment of financial need; and may include, but not be limited to:

1. An application process, in which the patient or the patient's guarantor are required to cooperate and supply personal, financial and other information and documentation relevant to making a determination of financial need;
2. Use of external publicly available data sources that provide information on a patient's or a patient's guarantor's ability to pay (such as credit scoring);
3. Reasonable efforts by the City to explore appropriate alternative sources of payment and coverage from public and private payment programs, and to assist patients to apply for such programs;
4. Take into account the patient's available assets, and all other financial resources available to the patient; and
5. A review of the patient's outstanding accounts receivable for prior services rendered and the patient's payment history.

It is preferred but not required that a request for charity and a determination of financial need occur prior to rendering of non-emergent medically necessary services. However, determination may be made at any point in the collection cycle. The need for financial assistance shall be re-evaluated at each subsequent time of services if the last financial evaluation was completed more than a year prior, or at any time additional information relevant to the eligibility of the patient for charity becomes known.

The City's values of human dignity and stewardship shall be reflected in the application process, financial need determination and granting of charity. Requests for charity shall be processed promptly, and the City shall notify the patient or applicant in writing within 30 days of receipt of a completed application.

D. Presumptive Financial Assistance Eligibility

There are instances when a patient may appear eligible for charity care discounts, but there is no financial assistance form on file due to a lack of supporting documentation, or inability to contact the patient. Often there is adequate information provided by the patient, or through other sources, which could provide sufficient evidence to provide the patient with charity care assistance. In the event there is no evidence to support a patient's eligibility for charity care, the City may use outside sources in determining a basis for charity care eligibility. Once determined, due to the inherent nature of the presumptive



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circumstances, the only discount that can be granted is a 100% write off of the account balance. Presumptive eligibility may be determined on the basis of circumstances that may include, but not be limited to:

1. Charity care determination by the facility to which the patient received care;
2. State-funded prescription programs;
3. Homeless or received care from a homeless clinic;
4. Participation in Women, Infants and Children programs (WIC);
5. Food stamp eligibility;
6. Subsidized school lunch program eligibility;
7. Eligibility for other state or local assistance programs that are unfunded (e.g., Medicaid spend-down);
8. Low income/subsidized housing is provided as a valid address; or
9. Patient is deceased with no known estate.

E. Eligibility Criteria and Amounts Charged to Patients

Full charity care reduction (100% write-off of ambulance service charges to charity care) shall be granted to patients earning less than or equal to 400% of the Federal Poverty Level (FPL), as published annually by the Department of Health and Human Services. The City and/or its contractor shall rely on financial data provided by the patient and may also utilize data from credit bureaus and other sources to determine if the patient is eligible for charity care. Once it is determined that the patient is eligible for charity care, The City or its contractor(s) shall make no further attempts to collect payment from the patient.

F. Communication of the Charity Program to Patients and Within the Community

Notification about charity available from the City, which shall include a contact number, shall be disseminated by the City through various means, which may include, but are not limited to, the publication of notices in patient bills and at other public places as the City may elect. The City also shall publish and widely publicize a summary of this charity care policy on the City's website, in brochures available in ambulances and at other places within the community served by the City as the City may elect. Such notices and summary information shall be provided in the primary languages spoken by the population serviced



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by the City. Referral of patients for charity may be made by any member of the City's staff, or by members of the community such as physicians, nurses, financial counselors, social workers, case managers, chaplains, and religious sponsors. A request for charity may be made by the patient or a family member, close friend, or associate of the patient, subject to applicable privacy laws.

G. Relationship to Collection Policies

The City's management shall develop policies and procedures for internal and external collection practices (including actions the City may take in the event of non-payment, including collections action and reporting to credit agencies) that take into account the extent to which the patient qualifies for charity, a patient's good faith effort to apply for a governmental program or for charity from the City, and a patient's good faith effort to comply with his or her payment agreements with the City. For patients who qualify for charity and who are cooperating in good faith to resolve their discounted bills, the City may offer extended payment plans, will not send unpaid bills to outside collection agencies, and will cease all collection efforts. The City will not impose extraordinary collections actions such as wage garnishments; liens on primary residences, or other legal actions for any patient without first making reasonable efforts to determine whether that patient is eligible for charity care under this financial assistance policy. Reasonable efforts shall include, but not be limited to:

1. Validating that the patient owes the unpaid bills and that all sources of third-party payment have been identified and billed by the City;
2. Documentation that the City has or has attempted to offer the patient the opportunity to apply for charity care pursuant to this policy and that the patient has not complied with the City's application requirements;
3. Documentation that the patient does not qualify for financial assistance on a presumptive basis;
4. Documentation that the patient has been offered a payment plan but has not honored the terms of that plan; and
5. Regulatory Requirements. In implementing this Policy, City management shall comply with all other federal, state, and local laws, rules, and regulations that may apply to activities conducted pursuant to this Policy.

H. Public Purpose

Ensures low-income and uninsured patients can access essential EMS without financial hardship, promoting health equity and preventing untreated medical conditions that could



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burden public health systems. This aligns with the City's commitment to equitable healthcare access and reduces downstream costs associated with unaddressed medical needs.



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VI. Revision History

Standard Statement: Revisions are detailed in the table. The revision number reflects the sequential order of updates and is archived under the corresponding fiscal year. The “Revision Date” refers to the date the change was made, which may differ from the “Effective Date” which is the first day of the subsequent Fiscal Year, as formal enactment is determined by Mayor and Council (M&C) action. The “Revision Summary” field specifies the nature of the change and may include a rationale.

Revision Number	Revision Date	Revision Summary	M&C
001	6/10/2025	Adopt FMPS Charity Care Policy	M&C 25-0500
002	09/16/2025	Adopt FMPS Charity Care Policy	