

Policy Title: Fee Policy

Policy Category: Internal Procedures

Originated By: MPHP Staff

Approved By: MPHP Staff and Advisory Committee

Date: March 12, 2012

Fee Policy:

While MPHP receives financial support from participating licensing Boards, area hospitals, professional organizations, and other contributions, these sources are not sufficient to cover MPHP's operating costs. A consistent fee structure is in place to assist in supporting program costs. MPHP does not have the capacity or resources to conduct extensive evaluations aimed at accurately determining each participant's ability to meet financial obligations. Standards are in place to guide clinical coordinators and participants during the intake process to provide consistency in payment arrangements. The MPHP also requires a participation fee as part of the commitment of the program participant.

Purpose:

- Assure consistency in program fee requirements
- Provide a baseline, with built-in flexibility for program fees
- Enhance program accessibility

Procedures:

Fee requirements will be discussed between the Clinical Coordinator and a new participant during the intake process. The Clinical Coordinator will discuss with the participant their current employment standing and determine the appropriate participant fee. A fee reduction may be requested at any time should the participant's employment or financial standing change.

Standard MPHP Participant Fees are as follows:

- Physicians, Dentists, Podiatrists, Pharmacists, and Advance Practice Nurses who have signed a Monitoring Agreement: \$150 per month.
- Physician Fellows, Residents, Dental Hygienists, Nurses, Physician Assistants and Veterinarians who have signed a Monitoring Agreement: \$75 per month.
- Students who have signed a Monitoring Agreement: \$20 per month.
- Participants who have signed a Recovery Maintenance Agreement (Sr. Monitoring): \$175 per Quarter.
- Out of State Participants being monitored primarily in an equivalent program in another state: \$150 per quarter.
- Pharmacy Technician program fees are waived automatically as they are covered by Licensing Board contract.

Fee Reduction Application:

Participants who work full time are expected to pay the standard program fee unless there are extenuating circumstances. Any participant who meets the criteria below may apply for a fee reduction.

Conditions for consideration of a reduction are as follows:

- Participant has limited income and/or debt to income ratio creates hardship.
- Participant has limited ability to work due to legal or medical reasons.
- Participant is experiencing financial distress, is the sole provider for minors, bankruptcy, etc.

Criteria for Granting Fee Reductions:

Requests will be considered based on the above criteria and will be reassessed every 6 months. Once the conditions of the reduction have changed; participants will need to reapply for the reduction or to continue. When participants fall into one or more of these categories, Clinical Coordinators may determine a reasonable fee for each participant based on the guidelines at their own discretion.

Guidelines for reductions (participants may fall into several of these categories)

- Working but not employed in profession – reduction from standard fee.
- Financial Hardship – fee determined on a case-by-case basis.

WHEN THE REQUIREMENTS OF THIS POLICY ARE NOT MET:

When the conditions of this policy are not met, the MPHP may respond with one or more of the following:

- a. Discussion with Operations Manager and Clinical Coordinator with a payment plan worked out.
- b. MPHP Clinical Coordinator reports administrative noncompliance to the appropriate licensing Board.
- c. Participants may not receive program completion status until financial obligations are met.
- d. Balance owed to the program may be sent to a collections agency if a payment plan is not established and honored, and there is a lack of communication over balance owed.

IMPORTANT NOTICE: The MPHP may charge a missed-appointment/no-show fee in the amount of \$50 - \$100 without 24 hours' notice of appointment cancellation or a reschedule, unless it is deemed that an emergency prevented notification to the program.