PIMA COUNTY HEALTH DEPARTMENT FAMILY PLANNING

POLICIES AND PROCEDURES

CLIENT REGISTRATION and FINANCIAL EVALUATION FORM

PURPOSE:  To assure accurate client registration and financial information

POLICY:

1.  The Client Registration and Financial Evaluation Registration Form is to be filled out legibly and correctly by Client or by OSL III.
2.  A client may change from one financial status to any other status as income changes. This may occur at any time during the year.
3.  The Client Registration and Financial Evaluation Registration Form is completed on each client at the initial visit, and updated at six months and annual visits. This form is also updated anytime the client reports a change in financial status.
4.  The client’s gross household annual income information, referenced by the family income and size, is used to determine financial status code on the schedule of discounts.
5.  The client must sign the form at Section No. 4 at bottom of form, verifying that they have completed the information on the form and that it is correct. The form must be signed to the best of the client’s ability and requires full signature.
6.  The Client Registration and Financial Evaluation Registration Form is to be filled out completely.
7.  For Staff use only
   A.  Status-OSL III determines status based on sliding fee scale upon financial information completed. The following status codes are in accordance with Title X guidelines and are to be used for all clients in clinic:
      0 = 0% pay
      1 = 14% pay
      2 = 29% pay
      3 = 43% pay
      4 = 58% pay
      5 = 72% pay
      6 = 86% pay
      7 = 100% pay
   B.  Payment source – OSL III will check proper box
   C.  Staff Signature – OSL III filling out invoice will sign and date form. Full signature is required.
8.  Questions about the financial status of a client are referred to a supervisor.