

## **96051.7 Discount Payment Program**

### **(a)**

All medically necessary services are eligible for the discount payment program. Services performed within the hospital are presumed to be medically necessary unless the hospital provides an attestation that the hospital services at issue in the complaint were not medically necessary. An attestation is considered valid if it is signed by the provider who referred the patient for the hospital services at issue in the complaint or the supervising health care provider for the hospital services at issue in the complaint. The hospital shall obtain the required attestation before it may deny a patient eligibility for the discount payment program on the basis that the services at issue were not medically necessary. (1) For the purposes of this section, "supervising health care provider" means the primary physician or, if there is no primary physician in the patient's record, the health care provider who had primary responsibility for a patient's health care.

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### **(b)**

For purposes of determining eligibility for the discount payment program as outlined in Health and Safety Code section 127405(e)(1), recent tax returns are

tax returns which document a patient's income for the year in which the patient was first billed or 12 months prior to when the patient was first billed. Recent paystubs are paystubs within a 6-month period before or after the patient is first billed by the hospital, or in the case of preservice, when the application is submitted.

**(c)**

The 90-day period outlined in Health and Safety Code section 127425 (i) shall start on the first billing statement's due date missed by the patient.

**(d)**

Notices required by Health and Safety Code section 127425(i) shall be sent at least 60 calendar days after the first missed bill and provide the patient with at least 30 calendar days to make a payment before the extended payment plan becomes inoperative.

**(e)**

When an extended payment plan is declared inoperative by a hospital pursuant to Health and Safety Code section 127425(i), the patient's financial responsibility shall not exceed the discounted amount previously determined pursuant to Health and Safety Code section 127405(d). In addition, the patient shall receive credit for any payments previously made under the extended payment plan.