PURPOSE:
The purpose of this policy is to distinguish patient accounts that should receive the uninsured discount.

POLICY STATEMENT:
WakeMed will provide approved Uninsured Patients with a discount on hospital and physician charges, according to the process set forth in this policy.

ENTITIES AFFECTED BY THIS POLICY (SCOPE):
This policy affects all patients receiving care within WakeMed who identify themselves as Uninsured Patients, as defined below.

WHO SHOULD READ THIS POLICY:
This policy shall be read by all staff, supervisors, managers, directors, and senior leadership in the WakeMed Patient Access and Revenue Cycle departments.

PROCEDURES:
I. CRITERIA

WakeMed discounts Uninsured Accounts according to the following criteria:

a. To receive the Uninsured Discount, a patient must identify themselves as an uninsured patient.

b. The Uninsured Discount does not apply to patients classified as underinsured (i.e., patients who present insurance coverage that is limited or otherwise does not adequately cover the patient’s charges). Underinsured patients may instead qualify for assistance according to the Financial Assistance Policy.

c. The Uninsured Discount does not apply if there is potential third party liability coverage that will apply to the patient’s account, including, but not limited to, attorney representation or liability insurance coverage (including medical payments coverage).

d. The Uninsured Discount does not apply to pre-arranged, non-covered services including, but not limited to, cosmetic procedures.

II. PROCEDURE

a. Patients may self-identify as an Uninsured Patient at the time of registration or at any other point during their course of treatment.
b. WakeMed reserves the right to reverse the Uninsured Discount if a potential payer source is identified and the patient fails to pay the required charges during the payment period.

c. The Uninsured Discount automatically applies whenever a patient is entered into the system as self-pay. The discount should be present on the patient’s first statement and will be shown under “Adjustments” and listed as “Discount (Uninsured).”

d. The Uninsured Discounts established under this policy apply only to WakeMed and WakeMed Physician Practices. No other person or entity is expected to provide this Uninsured Discount, including independent physicians or contracted groups (e.g., Wake Emergency Physicians, Raleigh Radiology, American Anesthesiology, and Raleigh Pathology).

e. The Uninsured Discounts currently in effect are shown in Attachment 1.

**DEFINITIONS**

<table>
<thead>
<tr>
<th>Uninsured Patient</th>
<th>A patient who is uninsured or elects to not use their healthcare coverage.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uninsured Account</td>
<td>An account owned by a patient who meets the definition of an Uninsured Patient.</td>
</tr>
<tr>
<td>Uninsured Discount</td>
<td>The discount provided by WakeMed to qualified Uninsured Patients. The current discount amount is set forth in Attachment 1.</td>
</tr>
</tbody>
</table>

**ATTACHMENTS**

**Attachment 1:** Current hospital and physician practice Uninsured Discounts

**ATTACHMENT 1**

<table>
<thead>
<tr>
<th>Hospital Charges Discount Amount</th>
<th>62%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician Charges Discount Amount</td>
<td>30%</td>
</tr>
</tbody>
</table>