Emergency Trauma Fund

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HOSPITAL ELIGIBILITY REQUIREMENTS

Hospital must first complete the Emergency Trauma Fund Application and submit it to ETF to the attention of the Program Director.

Have a fully executed HIPAA Agreement between hospital and ETF. ETF will accept the hospital's HIPAA Agreement.

ETF will make the determination regarding claims that are eligible for consideration for funding.

ETF's consideration is limited to trauma patients without the ability to pay for services and for whom the hospital has used best efforts to determine that there is no private, health plan, federal or third-party source of potential payment. For an claim to be considered for funding, the hospital's efforts must meet the following criteria:

1. The patient is unable or unwilling to pay for services rendered to them.
2. Has no commercial health coverage or any form of coverage at time of trauma.
3. The patient is not covered by any federally funded program which includes Medicare, Medicaid or Medi-Cal or the VA.

CLAIM BILLING EFFORTS

Hospital's accounts to be reviewed for the purpose of funding shall not include any receivables for person's covered by federal Medicare programs, or a state funded Medicaid program or any other federal or state health care program as such persons are excluded from the Emergency Trauma Fund (ETF) program consideration.

Further hospital must have used best efforts to qualify the person with any available state Medicaid program as well as any and all other payor sources. Hospital has exhausted all efforts to collect directly from the person for the health care services provided to them during their stay at the hospital. Finally all efforts to get reimbursed by the person have ceased and the hospital has assigned the account to bad debt or as uncollectible.

Hospital offered a reduced amount, a percentage of billed charges to the patient without any results.

If Hospital received actual written notification from the patient or the patient's representative that no payment will be made for the services provided this information should be conveyed to ETF.

Hospital must exhaust all sources for payment on patient's claim and stand that no payment will be forthcoming from a third-party or from any federal, state or commercial health plan and that hospital has not received any payment related to the claim.

FUNDING

ETF shall issue funds to hospital within 15 business days of the approval of a claim. Payment to the hospital shall be only for the hospital's technical component for the trauma services. Professional fees for physicians are not eligible for this fund. Physicians must apply through the Emergency Physician Compensation.

All claims paid by ETF will be considered a purchase of the receivable and all payments are accepted as full and final with all rights and remedies assigned to ETF.