# Table Of Contents

16.04.07 - Rules Governing Fees For State Hospital North

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>000.</td>
<td>Legal Authority</td>
<td>2</td>
</tr>
<tr>
<td>001.</td>
<td>Title And Scope</td>
<td>2</td>
</tr>
<tr>
<td>002.</td>
<td>Policy</td>
<td>2</td>
</tr>
<tr>
<td>003.</td>
<td>Definitions</td>
<td>2</td>
</tr>
<tr>
<td>004.</td>
<td>Fees</td>
<td>2</td>
</tr>
<tr>
<td>005.</td>
<td>Charges</td>
<td>2</td>
</tr>
<tr>
<td>006.</td>
<td>Waiver</td>
<td>3</td>
</tr>
<tr>
<td>007.</td>
<td>Personal Needs Allowance</td>
<td>3</td>
</tr>
<tr>
<td>008.</td>
<td>-- 995. (Reserved)</td>
<td>3</td>
</tr>
<tr>
<td>996.</td>
<td>Administrative Provisions</td>
<td>3</td>
</tr>
<tr>
<td>997.</td>
<td>Confidentiality</td>
<td>3</td>
</tr>
<tr>
<td>998.</td>
<td>Inclusive Gender</td>
<td>3</td>
</tr>
<tr>
<td>999.</td>
<td>Severability</td>
<td>3</td>
</tr>
</tbody>
</table>
000. **LEGAL AUTHORITY.**
Under authority vested in the Board of Health and Welfare by Chapters 1 and 3, Title 66, Idaho Code, and in accordance with the Idaho Administrative Procedure Act, Chapter 52, Title 67, Idaho Code, the Board of Health and Welfare adopts the following rules for establishing and charging fees for services provided at State Hospital North. (5-1-82)

001. **TITLE AND SCOPE.**
The scope of these rules is to provide standards for the establishment of fees for services and charges for the services provided to the patients at State Hospital North and are to be cited as Idaho Department of Health and Welfare Rules, IDAPA 16.04.07, "Rules Governing Fees for State Hospital North". (12-31-91)

002. **POLICY.**
Fees for services will be established and charged to all patients or responsible relatives. Further, State Hospital North shall not refuse service to any person because of race, color, religion, handicap, or ability or inability to pay. (5-1-82)

003. **DEFINITIONS.**

01. **Charge.** The dollar amount determined by costs per patient day for service received from State Hospital North and specialized services. (8-14-92)

02. **Cost Per Patient Day.** An accounting process of allocating all cost centers for the hospital to a twenty-four (24) hour period of time the patient occupies the hospital. (5-1-82)

03. **Responsible Relatives.** Relatives as defined by Section 66-354, Idaho Code. (5-1-82)

04. **Services.** Includes clinical evaluation, nursing care, medication, x-ray and laboratory procedures, food, laundry, housekeeping, maintenance support services, and administrative overhead. (5-1-82)

05. **Third Party Payor.** A payor other than a patient or responsible relative who is legally liable for all or part of patient charge. (5-1-82)

004. **FEES.**

01. **Diagnostic And Treatment Unit Costs.** Cost per patient day for the Diagnostic and Treatment Units will be determined by annual cost allocations and will be effective October 1 of each calendar year. (8-14-92)

02. **Specialized Service Costs.** Specialized services provided outside State Hospital North will be billed in addition to cost per patient day. (8-14-92)

005. **CHARGES.**
Charges will be established and billed based on fees calculated for services provided. (8-14-92)

01. **Insurance.** Claims will be itemized by cost per patient day unless the insurance requires a claim itemized by cost per service. No insurance claim will be filed without an assignment of insurance benefits to the hospital. All benefits from insurance must be made available in total to be applied toward payment of fees set forth herein. (8-14-92)

02. **Other Benefits.** All patient benefits from Social Security, Veterans Administration, retirement, trust accounts, and other periodic benefits and earnings shall be made available in total to State Hospital North to be applied toward payment of fees set forth in this chapter unless otherwise dictated by benefit sources. (8-14-92)
006. **WAIVER.**
Upon a showing of good cause, the Administrator of State Hospital North or designee may waive a patient's fees for any given month or portion thereof. Also, the Administrator of State Hospital North or designee may increase or decrease the amount set aside for patient personal needs. (8-14-92)

007. **PERSONAL NEEDS ALLOWANCE.**

01. **Set-Aside Amount.** Excluded and set aside from all income or benefits for patients will be a personal needs allowance established by the hospital or as required by the benefit source. (8-14-92)

02. **Use Of Moneys.** These moneys will not be applied toward payment of charges and will be accumulated and held for the patient to spend for his personal needs. (8-14-92)

008. -- 995. (RESERVED).

996. **ADMINISTRATIVE PROVISIONS.**
Contested case appeals shall be governed by Idaho Department of Health and Welfare Rules, IDAPA 16.05.03, Sections 000, et seq., "Rules Governing Contested Cases and Declaratory Rulings". (12-31-91)

997. **CONFIDENTIALITY.**
Before any information about a patient, client, registrant, applicant, or recipient contained in Department records may be released to the person who is the subject of the record, to another Department unit, to another governmental agency, or to a private individual or organization, the unit of the Department with custody of the record must comply with Idaho Department of Health and Welfare Rules, IDAPA 16.05.01, "Rules Governing Protection and Disclosure of Department Records (Confidentiality)". (12-31-91)

998. **INCLUSIVE GENDER.**
For the purpose of these rules, words used in the masculine gender include the feminine or vice versa, where appropriate. (5-1-82)

999. **SEVERABILITY.**
Idaho Department of Health and Welfare Rules, IDAPA 16.04.07, are severable. If any rule, or part thereof, or the application of such rule to any person, or circumstance is declared invalid, that invalidity does not affect the validity of any remaining portion of this chapter. (5-1-82)
Subject Index

A
Administrative Provisions 3

C
Charge 2
Charges, Based On Fees Calculated For Services Provided 2
Confidentiality 3
Cost Per Patient Day 2

D
Definitions 2
Diagnostic And Treatment Unit Costs, Per Patient Day 2

F
Fees 2

I
Inclusive Gender 3
Insurance, Claims Will Be Itemized By Cost Per Patient Day 2

L
Legal Authority 2

O
Other Benefits, Other Than Insurance 2

P
Personal Needs Allowance 3
Policy 2

R
Responsible Relatives 2

S
Services 2
Set-Aside Amount, Personal Needs Allowance 3
Severability 3
Specialized Service Costs, Services Provided Outside The Hospital 2

T
Third Party Payor 2
Title And Scope 2

U
Use Of Moneys, Personal Needs Allowance 3

W
Waiver 3