

POLICY:

Former patients with delinquent Private Pay accounts will be notified and given the option of paying the account in full or participating in a predefined monthly payment plan. Former patients will be notified of their financial obligation for services rendered by receiving monthly statements with balance due. Former patients, who did not wish to apply during their hospitalization, will be given another opportunity to apply for charity care or sliding fee scale discount financial assistance programs during the collection process.

OBJECTIVE:

To ensure an effective means of in house collection efforts of delinquent Private Pay accounts while adhering to generally accepted accounting principles as well as applicable Medicare regulations and current state and federal laws regarding collection.

PROCEDURE:

1. All self-pay accounts will be reviewed to determine the last date of payment. The collection specialist will attempt to contact the debtor by phone to setup a payment arrangement. The Accounts Receivable Manager will also remind the patient/responsible party of the hospital charity care and sliding fee scale discount financial assistance programs. The Accounts Receivable Manager will document all conversations with the debtor in the patient’s billing database.

2. After 120 days from the first billing statement, former patients who have made no payment, have elected not to apply for financial assistance, or have been denied approval for any financial assistance programs will be sent to a collection agency for further collections. At that time, Highland-Clarksburg Hospital will write the balance off the patient’s account.

If the patient/responsible party should apply for the charity care or sliding fee scale discount financial assistance programs within 240 days from the date of the first billing statement, and it is determined that the patient/responsible party qualifies for one of the assistance programs, Highland-Clarksburg Hospital’s Accounts Receivable Manager will contact the collection agency and instruct the account to be removed from collection and the credit bureau be notified to remove the balance from the patient’s credit report.

MONTHLY PAYMENT PLAN

Monthly payment plans may be arranged if patients are unable to pay their balances in full. The following payment arrangements may be made by the collection specialist. Any (reasonable) arrangement other than listed below must be approved by the CFO or designee.

	<u>Account Balance</u>	<u>Amount of Monthly Payment</u>
\$ 1.00-	25.00	Balance Due
26.00-	250.00	\$25.00

251.00-	500.00	50.00
501.00-	1,000.00	75.00
1,001.00-	2,500.00	100.00
2,501.00-	5,000.00	150.00
5,001.00-	10,000.00	Arrangement no less than \$250.00

Before any account is written off, the collection specialist will verify via the Molina Medicaid web portal that the patient has not (subsequent to their hospitalization) applied for or been approved for West Virginia Medicaid which could potentially be used as a source of reimbursement for the charges incurred by the patient.

After all in-house collection efforts have been exhausted per the above policy, the collection specialist will gather all documentation supporting that the collection policy was followed and submit to the CFO or designee for write off. Supporting documentation should include copies of EOB's from payer(s), collection letters, and any other correspondence that supports the write off.

The CFO or designee will review all documentation relating to the accounts suggested for write off. Once approval is given, the Accounts Receivable Manager or designee will adjust the accounts accordingly, and place appropriate accounts with a third party collection agency to pursue further collection.

If there are any questions regarding this policy, individuals are instructed to contact the Accounts Receivable Manager at 304-969-3105.