

-Pay Collection Policy

PURPOSE:

Conemaugh Health System's Mission to its patients includes providing assistance to those who do not have insurance, or who have a financial responsibility for after insurance balances do not qualify for Medical Assistance or Charity Care, but for whom the financial costs of care received creates a significant burden. This policy establishes the procedures for these situations.

In assisting those persons who do not qualify for Medical Assistance or Charity Care and who do not have insurance or who have a financial responsibility for insurance balances, Conemaugh Health System is committed to respecting the dignity of persons and reflecting responsible stewardship.

POLICY:

1. Patients without insurance will be provided medically necessary services regardless of their ability to pay.
2. Self pay inpatients, scheduled outpatients, and emergency patients will be screened by Revenue Cycle representatives or agencies for Medical Assistance eligibility, other governmental assistance programs, and/or charity care.
3. Patients without supplemental insurance may be screened by the Medical Assistance Eligibility Vendor for potential SSI and/or supplemental Medical Assistance.
4. Third party deductible, coinsurances and copay amounts are the responsibility of the patient and, when they can be accurately determined, are due at the time of service. Emergency room patients shall be requested to pay copay amounts at the time of discharge.
5. Emergency Medical Care: Emergency care will be provided regardless of the patient's ability to pay or financial assistance status, according to EMTALA Guidelines.
6. Acceptable methods of payment are cash, personal check, money order, MasterCard, and Discover.

POLICY SOURCE:

CROSS REFERENCE: Conemaugh Health System
Charity Care Policy

ORIGINATION DATE: 10/01/2005

Revised 2/1/2007

Approved Revised 2-4-2011

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Emergency Services: Patients without insurance

1. Patients with no insurance will be checked for Medicaid eligibility. If eligibility is located, the appropriate Medicaid plan will be entered into the system.
2. If no third party coverage is available, the patient will be requested to pay a minimum payment of \$100.00 upon discharge. In consideration of the EMTALA regulations, under no circumstances is the patient to be asked for payment prior to service.

B. Post service billing and payment

1. Patients will be invoiced for any amounts not paid by insurance after their claims have been adjudicated by their insurance carrier. Patients without insurance will be invoiced within 5 days of service.
2. The patient statement cycle begins with an itemized detail summary of charges by service area. If no payment is made, the "first patient statement" is issued in 30 days. Additional patient statements will be issued at the 60 and again on the 90 day.

If the patient balance remains after the 90 day statement, a message on the statement will indicate the final notice for payment or payment arrangements before being sent to a collection agency. If there is no payment or payment arrangements established, the account will be transferred to bad debt (collection agency) at the end of the 120 day cycle. All accounts will be screened for presumptive charity care (as per the Charity Care Policy) prior to being sent to collections. If the account is placed with the collection agency, the Credit Bureau will also be notified of the delinquency. Potential liens, lawsuits are also avenues that may result in payment of an account.

C. Self Pay Discount

For patients who have no insurance coverage, patient balances will be discounted by 60% off of charges. There will be no discounting for any after insurance balances (i.e. copayments, deductibles, coinsurance) as mandated by Pennsylvania State Insurance Law.

D. Payment Plans

Patients unable to pay their balance due in full may make payment arrangements for up to 12 months, however, the minimum monthly payment will be \$25 or 1/12th of the balance, whichever is higher.