

No: 8212.010
Orig: Business Services
Date: 06/14, 03/17

Credit & Collection Policy

I. POLICY

Unity Medical Center will provide Emergency care including evaluation of emergency conditions and necessary emergency treatment to individuals who present themselves as emergency patients without regard to payment. Criteria will be the same as those established under EMTALA Laws and Regulations.

UMC will provide Non-Emergency care for those who are uninsured or underinsured and do not have the ability to pay for medically necessary healthcare services. UMC will identify any patient financial responsibility prior to service and require the patient/guarantor to pay or make acceptable financial arrangements for payment prior to service being rendered. Uncompensated care will be available to those who successfully apply under the hospital's Charity Care policy. It will be the applicant's responsibility to demonstrate inability to pay.

II. PURPOSE

The credit and collection policy is designed to provide financial assistance while maximizing the availability of health care services in a consistent, equitable and effective manner. The intent is to assure that those who require health care services are able to obtain such services while requiring that they pay as much as possible toward the cost of the services.

III. IMPLEMENTATION

A. UMC will provide emergency services to all patients without regard to age, race, religion, sexual orientation and /or ability to pay.

Emergency means "A medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention could reasonably be expected to result in placing the health of the individual (or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy, serious impairment to bodily functions or serious dysfunction of any bodily organ or part. With respect to a pregnant woman who is having contractions that there is inadequate time to affect a safe transfer to another hospital before delivery, or that the transfer may pose a threat to the health or safety of the woman or her unborn child."

B. The hospital requires payment for all services rendered to patients. Except where prohibited by law or contract, the hospital will look to the patient/guarantor for payment in full on all accounts.

1. Insured patients that do not qualify for a charity discount or state, federal, and/or endowment funds program are responsible for paying co-pays, deductibles, co-insurance and/or fees for non-covered services prior to the time services are rendered. Payment plans may be available to patients based on the amounts due and the patient's financial history.

2. Uninsured patients that do not qualify for a charity discount or state, federal, and/or endowment funds program are responsible for charges prior to the time services are rendered. Prompt pay discounts are available for uninsured patients that agree to comply with specified guidelines below.

Unity Medical Center

A. Outpatient Services and Emergency Room a 10% discount of charges is available for accounts paid in full at time of service or by the due date of first statement received after services are completed.

B. Patients without insurance who cannot pay in full at the time of service or by the first statement received due date, must speak to the financial counselor to set up satisfactory payment arrangements (based on the outstanding amount) and/or successfully apply for medical assistance or charity care prior to the delivery of non-emergency services.

B.1. All patients with insurances other than Medicare will be required to make their copayment at time of service per insurance guidelines.

C. Scheduled services for uninsured patients will be referred to a Financial Counselor prior to services being rendered. Scheduled services are defined as medical care scheduled with the hospital prior to the anticipated delivery of care. An estimate of patient liability based on average charges per service and individual insurance benefit coverage will be calculated and communicated to the patient prior to arrival. Satisfactory financial arrangements for the patient's self-pay portion must be completed prior to the time services are rendered. Patients with active overdue accounts receivable accounts will be asked to make satisfactory payment arrangements and/or successfully apply for medical assistance or charity care prior to the delivery of non-emergency services.

D. Self-pay patient balances for unscheduled services provided will be due and payable prior to services being rendered. Unscheduled services shall be defined as services that are not classified as an emergency and do not require scheduling. It is recognized that upfront financial counseling is not always possible in these instances consequently payment arrangements may be made at the point of or post service. Patients with active overdue accounts receivable accounts will be asked to make satisfactory payment arrangements and/or successfully apply for medical assistance or charity care prior to the delivery of non-emergency services. A brochure, outlining hospital payment guidelines, will be available to patients and physicians.

E. As a courtesy to patients, UMC will bill all acceptable third parties for payment when complete information and assignment is provided.

F. The following options will be available to patients for payment:

1. Cash, debit card, check or credit card. UMC Hospital accepts Visa, MasterCard, Discover Card, & American Express.

3. Charity Applications: (Approval and advance patient share payment prior to services rendered.)

4. Medicaid Eligibility Approval: (Approval and advance patient share payment prior to services rendered.)

G. Employee patient accounts will be handled in a manner consistent with the financial expectation of any UMC patient. In addition employees may utilize payroll deduction as an alternative payment option. If the employee elects to use payroll deduction they will be responsible for completing a payroll deduction form for any new or additional accounts prior to services being rendered with a minimum of \$25 a paycheck. If there is no effort made by the employee to pay medical bills, UMC will take further action on accounts.

H. UMC is committed to assisting patients that do not have the financial resources to pay for their health care services. The hospital will make available financial counseling to determine the appropriate disposition of the patient account.

A Financial Counselor will review all such accounts for possible financial assistance from state, federal, and/or endowment funds programs. UMC will provide charity assistance to patients who meet criteria. Any patient/guarantor who refuses to complete the application will be considered as having the ability to pay his account and handled accordingly.

I. Collection Process: The Patient Accounting Department of UMC will attempt to collect all debts by way of monthly statements, telephone contacts, and /or collection letters. Uncollected delinquent accounts may be referred to an external collection agency or attorney for continued collection.

Acceptable Monthly Payment Amounts (No Discounts)

<u>Balance</u>	<u>Amount</u>
Under \$50	100% of balance
\$50-\$100	50% of balance
\$100-\$500	35 % of balance
\$500 - \$1000	25% of balance
\$1,000 or more	20% of balance

IV. RESPONSIBILITY FOR INTERPRETATION

The Chief Financial Officer will be responsible for interpretation of this policy.

CFO, date

CEO, date