

**SUBJECT      COLLECTION PROCEDURES**

**PURPOSE**      To maintain adequate cash flow and consistent application of financial policies.

**POLICY**      Before surgery, patients' insurance information is collected, and benefits are verified. Patient deductibles and known co-pays will be calculated, and patients may be notified of their expected payment on the day of service. Front desk personnel will collect amount due upon patients arrive of procedure. Methods of payment are cash, check or credit card. Self-pay patients will be expected to pay the entire estimated amount on the day of service.

After surgery is performed, appropriate charges will be entered and claim generated, if appropriate. Once insurance has processed, a balance bill statement will be generated to the patient for any remaining responsibility. If self-pay patients have any remaining responsibility, a statement will be generated.

Statements will be sent out monthly. Progressive collection attempts will only occur if no payments or payment plans have been received.

After the third statement, if no payments are received, escalated attempts to collect the debt will be made. If the patient has made no arrangements or attempts to resolve the debt at this point, the services of a third-party collection vendor will be engaged.

Payment plans may be arranged at the discretion of the account receivable department; however, adequate regular payments must be received to keep the account in good standing. Patients who set up a payment plan will be expected to pay at least half of the expected responsibility on the day of service. The remaining balance will be split into two equal payments over the next 60 days. The additional payments are automatically deducted on a confirmed date with the patient, from a credit card provided by the patient.

Patients with bad debt history in the facility must pay their old balance in full, and any anticipated current responsibility, before they can receive additional services.