

## POLICY and PROCEDURE

<b>TITLE:</b> <b>Patient Payment Policy</b>	
<b>Number:</b> 400-07	<b>Author:</b> Emily Weber
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<b>Facility:</b> Memorial Hospital of Carbon County	

**TITLE:** *Patient Payment Policy*

**I. Purpose/Expected Outcome:** The purpose of this policy is to establish the expectations for both the staff and the patient of collecting copays, coinsurance, deductible, or establishing a payment plan toward services.

**II. Policy:** Memorial Hospital of Carbon County (MHCC) and its owned clinics will collect appropriate copays, coinsurance, deductible, or establish a payment plan toward services.

Patients are to be advised of the amount needed when a visit is scheduled, or as much in advance of a scheduled visit as possible.

MHCC staff has the responsibility to ensure that payments made are processed timely and accurately, following established cash handling procedures.

The Clinic Manager, Department Manager, or Division Head has the overall responsibility for ensuring that payments collected at time of service are processed according to established procedures. They are also responsible for ensuring staff is communicating the payment required at the time the visit is scheduled.

**III. Procedure/Interventions:**

**Scheduling:**

When scheduling a patient visit, all insurance information is to be obtained and confirmed by the scheduling department. Patient/Responsible Party is to be advised that payment for appropriate copayment, coinsurance, deductible, or establishing a payment plan, is to be paid prior to the time of registration for the services that are to be rendered. This applies

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whether the patient has insurance coverage or is self-pay. A picture ID and proof of insurance is to be provided at the point of registration for every visit.

Point-of-Service:

When a patient presents for an appointment, all demographic and insurance information will be re-verified.

The appropriate copayment, coinsurance, deductible, or payment plan, is to be requested at the time of registration (clinic and hospital). If the patient is not able to pay the required amount for the visit:

- a. Non-emergent patients are to be rescheduled for a future date and advised that the amount required must be paid at the time of service to be seen unless payment plan has been established.
- b. Information regarding available financial assistance through MHCC is to be offered to the patient.
- c. Patients that have an outstanding balance of \$1500.00 or higher (not established with a payment plan) OR patients with three (3) or more outstanding copays will not be seen unless emergent OR patient is able to bring account balance to current status at time of service.

Insured-hospital and clinics: All insured patients are eligible for a 25% prompt pay adjustment off patient responsibility (copays and deductibles not included.) MHCC may offer other adjustments. All patients will be subject to their copays or deductibles for their visits.

Uninsured-hospital and clinics: MHCC has agreed to further contribute toward the care of self-pay patients in the form of a monetary adjustment off the normal customary charges. Patients who present to MHCC as uninsured will qualify to receive a 25% adjustment off the customary charge. MHCC may offer other adjustments.

Payment Plans:

Reasonable payment arrangements can be made if necessary. Payment plans are at the discretion of the Chief Financial Officer and all payment plans are established through MHCC's established payment plan software with a signed contract on file. MHCC may accept random patient payments, but accepted payments do not constitute an accepted payment plan. Accepted payment plans must be approved via payment plan software with signed contract. After 120 days, if an agreement has not been made and no payment has been made, the account will be subject to third-party collections.

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Payment options available to patients are:

- Visa, MasterCard, and Discover (both debit and credit), money orders, cashier's checks, traveler's checks, and personal checks
- Online using credit or debit card
- Over the phone using credit or debit card by calling our customer service department at (307) 324-2221
- Payment plan software
- Online payment portal through website
- Payment plans need to be paid within 10 days of the due date on initial patient responsibility statement to avoid the account being turned over to third-party collections. If the patient cannot make the total payment amount due within the time frame, they will need to contact the Business Office at (307) 324-2221 to make arrangement with the Financial Counselor. After the 10-day grace period, all payment plans are void and the account will turn to third party collections.

If an individual becomes delinquent in meeting the terms of the payment plan, only one opportunity will be allowed to correct account, meaning payments must be made in accordance with plan and continue without incidence until such a time account is paid in full. Subsequent offences will result in immediate collection processes.

Financial Assistance:

- MHCC provides a Financial Assistance Program available to patients who qualify.
- Any patient who qualifies for the MHCC Financial Assistance Program will be subject to the same facility collection process as other patients, but only for the percentage that was not adjusted off as part of the program.

#### **IV. Procedural Documentation:**

**V. Additional Information:** This policy applies to all hospital departments and clinics EXCEPT the Emergency Department. All patients that present to the ER and request care will receive a Medical Screening Exam. Those patients who are deemed by the (MSE) to be non-emergent will be asked for their copay, deductible or a deposit in the case of a self-pay patient. If they are not able to meet their financial obligations they will not be turned away, and the patient treatment will continue.

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**VI. References:**

**VII. Other Related Policies/Procedures:**