

# ELLENVILLE REGIONAL HOSPITAL

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<b>DEPARTMENT: PATIENT FINANCIAL SERVICES</b>	
<b>APPROVED BY: Bob Rue, CFO</b>	<b>EFFECTIVE: 1/14</b>
<b>REVIEWED: 7/14, 9/15, 7/16, 7/19, 7/20, 7/22, 7/24</b>	<b>REVISED: 7/17, 7/18, 11/24</b>

## STATEMENT & PURPOSE:

To define Ellenville Regional Hospital's ("ERH") process of handling collection of self-pay balances, for both uninsured and insured patients. For insured patients, these balances can be in the form of copayments, co-insurance, and deductibles.

## POLICY:

### Available Payment and Balance Resolution Options:

1. If a patient is looking to pay a balance in full, the patient may:
  - a. Pay online via debit/credit card by following directions provided on their paper statement.\*
  - b. Pay by debit/credit card via text or email message if patient opted in to these services.\*
  - c. Mail a check to the address on the paper statement with a detachable slip.
  - d. Contact a Patient Financial Services (PFS) Account Follow-Up Representative to make a payment over the phone.\*
  - e. Present at a Registration window to pay by cash, debit/credit card or check.\*

\* Patients seeking to pay their balances through a credit card must be provided the Ellenville Regional Hospital Patient Acknowledgment regarding Credit Card Use, which informs the patient that medical bills paid by credit card are no longer considered medical debt. In paying a balance for healthcare services with a credit card, the patient is consenting to waive federal and state protections around medical debt. Payment by credit card will only be accepted after the patient has been notified of the risks for paying for medical services and has affirmatively acknowledged the Ellenville Regional Hospital Patient Acknowledgment regarding Credit Card Use form.

2. If a balance cannot be paid in full:
  - a. The patient can contact a PFS Account Follow-Up Representative to set up a flexible payment arrangement.
    - i. Patient has the option to receive monthly statements at agreed upon monthly rate or put a credit/debit card on file to be auto charged.
  - b. Financial Assistance will be offered if the patient is unable to pay their balance and is determined to be eligible.
    - i. If a patient does not qualify for Financial Assistance, they may still be eligible for a discount. These are at the discretion of PFS and are on a case by case basis (ex. patient demonstrates a case of financial hardship).
    - ii. If patient qualifies for a Financial Assistance discount and the new adjusted balance cannot be paid in full, the monthly payment limit will not exceed 5% of

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the patient's gross monthly income and the rate of interest charged, if any, shall not exceed 2% of the patient's gross monthly income.

## Collections Policies

1. If a patient has submitted an application, they cannot be required to pay a hospital bill while their application for financial assistance is being considered. The patient may apply for financial assistance at any point, including during the collections process. Any bill sent while a patient has submitted a financial assistance application should be disregarded while their application is in process.
2. Patients who are Medicaid eligible at the time of service are not to be sent to collections for an outstanding balance.
3. The Hospital Financial Assistance policy dictates that the collection agency that ERH contracts with complies with the Hospital's financial assistance policy and also provides information to patients on how to apply.
4. ERH will not send accounts to collection if an application for financial assistance is in process. Once an account(s) have been designated as Financial Assistance, statements will stop being sent until a determination is made.
5. Except for patients who have pending applications for financial assistance, if a patient has not paid their balance within 180 days after first post-service bill has been issued, the balance may be flagged for referral to a collection agency. Patients will receive notification that an account will be referred to collections at least 30 days prior to referral.
6. Lawsuits to collect unpaid balances cannot be brought before 180 days from the first medical bill, regardless of the patient's eligibility for financial assistance. Neither ERH nor the collection agency it contracts with shall commence legal action for failure to pay an outstanding balance against patients with incomes below 400% of the FPL.
7. To commence legal action against a patient, the collection agency that the hospital contracts with must obtain a signed attestation from ERH's Chief Financial Officer that the hospital has determined the patient's income is above 400% of the FPL.
8. The Hospital Financial Assistance policy does not permit the forced sale or foreclosure of a patient's primary residence to collect on an outstanding bill.
9. ERH will not sell any patient debt, regardless of eligibility for financial assistance to a third party, unless the third party intends to forgive all debt and does not intend to pursue any

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collections. ERH is responsible for determining that any debt buyer is doing so for the express purpose of absolving the debt.

10. No hospital employee will complete any portion of an application for medical financial products for a patient, or otherwise arrange for or establish an application that is not completely filled out by the patient. Hospital staff may answer a patient's questions and provide assistance if requested, so long as the application is completed wholly by the patient.

## **Collections Process:**

The collection of copayments are typically an upfront effort prior to or at the time of service for non-emergency services. For Emergency Room visits, a patient will be asked to remit co-payments after treatment.

The PFS department will attempt to collect all patient balances after a patient has received care at the hospital through a variety of available methods. This can include, but is not limited to paper statements, telephone calls, text messages & email notification. Except for those patients who have submitted applications for financial assistance, these methods are utilized over the course of 180 days from the day the first paper statement has been issued. If the patient does not make reasonable efforts to resolve their balance, has missed payments as part of a payment arrangement, or does not have a pending application for Financial Assistance, then the account will be eligible for referral to a collection agency. The collection agency shall not commence legal action for failure to pay an outstanding balance against patients with incomes below 400% of the FPL.

Prior to collection agency referral, the hospital will engage with our insurance discovery vendor to identify whether active insurance coverage exists. This will be reviewed by PFS representatives, and if active coverage is identified it will be billed to the insurance.

## **Other Policy Provisions:**

The Credit & Collection Coordinator or PFS Account Follow-up Representatives will attempt to resolve accounts that return with bad address information using any available tools provided (contact by phone, third-party vendors, etc). If a correct address cannot be determined using these tools, the account will become eligible for referral to a collection agency.

PFS will make reasonable efforts to determine whether individuals are eligible for Financial Assistance or not. Notification of the Financial Assistance Policy will be made available during the registration process, through conspicuous posting of language appropriate information in the hospital, during discharge, and on bills and statements sent to patients. ERH's Financial Assistance Policy and application information is also available for download on the Hospital's website.

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