

Sylacauga Health Care Authority
D/b/a Coosa Valley Medical Center

BILLING AND COLLECTIONS POLICY

I. POLICY

This Patient Billing and Collection Policy is consistent with Coosa Valley Medical Center's mission and in compliance with the Federal Affordable Care Act. All patients who have received emergency or medically necessary care shall be provided the opportunity to apply for free or reduced cost care in conformance with the federal Patient Protection and Affordable Care Act and its implementing regulations. Coosa Valley Medical Center will not discriminate on the basis of race, color, national origin, citizenship, religion, creed, gender, sexual preference, age, or disability in providing its services.

This policy, along with the related Financial Assistance Policy, establishes Coosa Valley Medical Center's procedures regarding collection of patient accounts. The purpose of the policy is to reasonably balance the need for financial stewardship with needs of individual patients who are unable or unwilling to pay their accounts.

In order for Coosa Valley Medical Center to responsibly manage its resources and provide the appropriate level of assistance to the greatest number of persons in need, patients are expected to contribute to the cost of their care based on the requirements of their insurance, or in the case of those uninsured/underinsured, based on their individual ability to pay.

II. PURPOSE

The Patient Billing and Collection Policy provide general guidelines for patient billing and collecting payment for services. The purpose is to assure reasonable collection of accounts from all appropriate sources and to recognize at the earliest point possible when an individual requires assistance and/or that an account may qualify for Financial Assistance or free care, discounted care, or as bad debt. The policy is intended to achieve Coosa Valley Medical Centers compliance with applicable State and Federal requirements including those of the Fair Debt Collection Practices Act.

III. SCOPE

This policy shall apply to the Hospital, its Extended Business Office(s), and Early Out and Collection agencies engaged by the Hospital.

IV. ACCOUNT RESOLUTION

- A. The Coosa Valley Medical Center Financial Assistance Policy provides assistance to eligible patients who are uninsured, underinsured, ineligible for governmental healthcare benefit programs, and for whom it would be a hardship to pay fully for the cost of their care. It is Coosa Valley Medical Center's policy

to pursue collection of patient balances from those patients who have the ability to pay for these services. The Coosa Valley Medical Center Patient Billing and Collection Policy will be applied consistently to all patients regardless of insurance status. Collection procedures will comply with applicable laws and with Coosa Valley Medical Center's mission and values. Consistent with this policy and the Coosa Valley Medical Center Financial Assistance policy, Coosa Valley Medical Center will clearly communicate with patients regarding financial assistance needs and payment expectations as early in the appointment and billing process as possible.

- B. Coosa Valley Medical Center policy prohibits requiring payment for emergency medical conditions prior to the patient having received services or undertaking collection activities that could interfere with provision on emergency medical care.
- C. All financial information obtained from patients will be kept confidential.

V. BILLING AND COLLECTION PRACTICES

A. Establishing Patient Financial Responsibility

- 1. Coosa Valley Medical Center will make reasonable efforts to identify third-party payers to assist patients in resolving their bills. Coosa Valley Medical Center will also take the following actions:
 - a) Validate that the patient owes the unpaid bills.
 - b) Collect all amounts permitted from third-party payers
 - c) Work with patients toward resolution of outstanding insurance claim payment issues
 - d) Inform patients of and provide them with reasonable assistance in applying for financial assistance offered by Coosa Valley Medical Center
 - e) Invoice patients for the amount of the cost of services for which they have a financial responsibility after the steps outlined above have been taken.

B. Collecting Patient Information

- 1. It is the patient's responsibility to provide Coosa Valley Medical Center with accurate information regarding health insurance (including primary and secondary carriers), address, and applicable financial resources to determine whether the patient is eligible for coverage through private insurance or through available public assistance programs. The patient is expected to assign benefits due from any insurance carriers.

2. Coosa Valley Medical Center Registration staff will obtain demographic and financial/insurance information, including specifics as to the types of insurance coverage available, prior to or at the time services are rendered.
3. Patients will be requested to provide identification such as driver's license, telephone numbers including cell phones, email addresses, etc. to insure accuracy of demographics and will also be asked to provide proof of insurance coverage by presenting a valid insurance card.
4. Coosa Valley Medical Center will make reasonable efforts to verify patient supplied information when services are scheduled or at the time the patient receives services.
5. If the patient or guarantor is unable to provide the billing and collection information needed, including demographic and insurance information, Coosa Valley Medical Center will attempt to obtain the information for the individual.
6. Coosa Valley Medical Center will make reasonable and diligent efforts to investigate whether a third party resource may be responsible for payment for the services provided.
7. Where Coosa Valley Medical Center's reasonable and diligent efforts result in a payment on the health care claim billed, the payment will be applied to the outstanding account.
8. Coosa Valley Medical Center reserves the right to utilize outside agencies to help pursue payment for services.

C. Patient Responsibilities

1. The patient has the responsibility to obtain proper physician referral(s) or other authorizations and may be responsible for unpaid claims resulting from failure to obtain authorization from the insurance provider.
2. The individual is required to inform either his/her current health insurer (if applicable) or the agency that determined the patient's eligibility status in a public health insurance program of any changes in family income or insurance status.
3. In the event of a denial of benefits from the insurance carrier or other responsible party, the patient is expected to assist Coosa Valley Medical Center in any appeal as necessary.

4. Patients are required to notify any public health insurance program of any lawsuit or insurance claim that will or could cover the cost of the services provided by Coosa Valley Medical Center.
5. Coosa Valley Medical Center expects patients to adhere to Coosa Valley Medical Center policies and guidelines in paying their outstanding balances in a timely manner.

D. Patient Billing Information / Process

1. Coosa Valley Medical Center is responsible for the prompt processing and aggregation of charges for services provided to patients in order to provide for the timely collection of charges and to maintain the financial solvency of Coosa Valley Medical Center.
2. Coosa Valley Medical Center by way of its designated Revenue Cycle Vendor bills the insurance carrier (payer) for most services. Co-pays and any other responsibility amounts are due at the time of service. The individual will be responsible for paying any charges for services not covered by insurance, which may include the entire amount charged.
3. Except as provided, payment may be required in advance or at the time of service, particularly for non-covered services or out-of-network, copayments, and other deductibles, or selected services such as cosmetic procedures, Financial Clearance for Elective Scheduled Services.
4. Patient Billing Statements
 - a) Coosa Valley Medical Center by way of its designated vendor sends patient billing in accordance with the regulations of the Centers for Medicare and Medicaid Services (CMS) and insurance industry regulations.
 - b) Patients may receive separate bills for services rendered at Coosa Valley Medical Center such as hospital services, physician services, anesthesia, or external services, such as an ambulance, pathology or emergency room physician.
 - c) The hospital bill reflects the room rate, medication, medical supplies, and services. The hospital bill, sometimes referred to as the facility bill, covers the cost of operating the facility and other overhead costs.
 - d) The Physician's bill is for professional services or procedures performed by the physician.

5. Customer Service Departments are available to provide information or answer questions about patient billing. The contact information is provided on the patient statements, and is also listed on the Coosa Valley Medical Center website and published in servicer patient information sources.
6. Coosa Valley Medical Center shall comply with applicable requirements with respect to non-billing for specific services or readmissions that Coosa Valley medical Center determines to have resulted from a Serious Reportable Events (SRE). SREs that do not occur at Coosa Valley Medical Center do not preclude Coosa Valley Medical Center from billing for related services. Coosa Valley Medical Center further maintains all patient-related information in accordance with applicable federal and state privacy, security, and ID theft laws.
7. Coosa Valley Medical Center's billing statements, payment plan statements and dunning letters contain a written notice informing patient about the availability of financial assistance which includes:
 - a) The notice of financial assistance
 - b) How to apply for financial assistance
 - c) How to obtain the information regarding the program
 - d) Coosa Valley Medical Center's phone number and website address

E. Resolving Patient Balances

Once the patient's financial responsibility has been established, Coosa Valley Medical Center will provide the patient with information on options available to address the patient balances.

F. Disputing Bills

Patient will be informed of the process by which ey may question or dispute bills. The name of the office, its address, and a phone number to which disputes should be directed will be listed on all patient bills and collection notices sent by Coosa Valley Medical Center or it's designated vendor(s).

G. Actions Taken in Event of Non-Payment

1. Delinquent Accounts – A patient's account may become delinquent if payment is not made by the due date noted on the patient statement. If payment is not made for more than two billing cycles or if a partial payment is made, the account may become delinquent.
2. Communication

- a) Steps will be taken to communicate with patients with delinquent accounts encouraging them to comply with payment plans in order to prevent referrals to outside collection agencies. Coosa Valley Medical Center or designated vendor will provide information on financial assistance and payment options to patient informing them of the outstanding balance due.
- b) Coosa Valley Medical Center or designated vendor may use the following methods in order to collect payment from patients with delinquent accounts: statements and letters requesting payment; phone calls; recorded messages; and written notices.
- c) During any state of the revenue cycle process, if a determination is made that the patient requests financial assistance, all collection efforts will be suspended. If the patient applies for Coosa Valley Medical Center's Financial Assistance, all collection efforts will be suspended while the application is being considered and the patient is notified regarding the determination of eligibility.

H. Payment Plans

Coosa Valley Medical Center or designated vendor provides patient with the ability to pay off their account(s) utilizing a sort-term monthly payment plan. Under the Payment Plan option, patients may take up to twelve months to pay off their account(s), length is determined based on balance and payment plan guidelines, and will receive a statement each month that shows the monthly payment amount and the remaining balance left to pay. Coosa Valley Medical Center also offers to patients who require a longer-term monthly payment plan the option to apply for a patient loan via contracted designated Loan Program Vendor for a term up to forty eight months.

VI. COLLECTION PRINCIPLES

A. Bad Debt Resolution

No account will be subject to bad debt collection actions within 3 billing statement cycle of issuing the initial bill and without first making reasonable efforts to determine whether that patient is eligible for financial assistance, unless excluded below. Coosa Valley Medical Center will not initiate collection actions against a patient if the patient has provided documentation showing that he or she has applied for health care coverage under Medicaid, or another publicly sponsored health care program.

B. Collection

1. Collection actions may be taken by Coosa Valley Medical Center when pursuing payment from patient with accounts as defined by policy.
 - a) Accounts ineligible for financial assistance.

- b) Accounts granted discounts under financial assistance but where the patient is no longer cooperating in good faith to pay the remaining balance.
- c) Accounts where patients have made no arrangements to resolve their outstanding balance.
- d) Accounts where patients did not provide accurate contact information so are deemed to be uncooperative and therefore excluded from the 3 billing statement cycle timeframe.

2. Early Out Agencies

- a) Early Out agencies may be used by Coosa Valley Medical Center to assist in first party collection of patient balances.
- b) External parties are required to abide by Coosa Valley Medical Center policies when representing or working on behalf of Coosa Valley Medical Center.
- c) A copy of the approved Coosa Valley Medical Center Patient Billing and Collection Policy will be given to all Early Out agency(s) working to collect from patients on Coosa Valley Medical Center accounts to assure compliance with the policy.

3. Collection Agencies

- a) Collection agencies may be used by Coosa Valley Medical Center to assist in collecting patient balances. In general, accounts will not be placed with a full service collection agency until internal and Early Out collection efforts are exhausted.
- b) External parties are required to abide by Coosa Valley Medical Center policies when representing or working on behalf of Coosa Valley Medical Center.
- c) A copy of the approved Coosa Valley Medical Center Patient Billing and Collection Policy will be given to all collection agency(s) working to collect from patients on Coosa Valley Medical Center accounts to assure compliance with the policy.

4. Collection Actions

- a) The following collection actions may be pursued by Coosa Valley Medical Center
 - 1. An initial bill will be sent to the party responsible for the patient's personal financial obligations
 - 2. Coosa Valley Medical Center or designated Early Out vendor will issue subsequent patient billings before referring an account to an external collection agency. Patient billing statements inform the individual of the availability of Coosa Valley Medical Centers Financial Assistance and how to apply to the program.

3. The patient may be contacted by telephone, text message, email or by any other notification method that constitutes a genuine and reasonable effort to contact the party responsible for the financial obligation.
4. Coosa Valley Medical Center will utilize alternative methods to locate the party responsible for the obligation or to determine the correct address on patient billings returned by the postal office service as “incorrect address” or “undeliverable.” Alternative methods may include use of skip tracing, use of the internet, post office records or other commercially available means of tracing a patient or guarantor’s residence or point of contact.
5. The patient will receive a “final notice” indicating that the account will be referred to an external collection agency when an acceptable payment has not been received or when an appropriate payment plan has not been established.
6. Patients will be informed of the right to establish a payment plan and the option to apply for Financial Assistance.
7. Coosa Valley Medical Center will provide prompt and courteous financial counseling to all patients in need and will assist these patients in obtaining any available financial assistance from federal, state, or private agencies in order to meet their financial obligations to Coosa Valley Medical Center. Options for Medical Assistance or free care/uncompensated care will be made available to any patients who are unable to pay all or part of their accounts.

5. Third Party Collection Agencies

- a) The patient account may be referred to the third party collection agencies for continued collection efforts.
- b) Typically, the account is referred if payment is not made by the third billing cycle or if a payment plan is not established.
- c) The collection agencies are required to comply with 501r