

PRESENTATION MEDICAL CENTER COLLECTION POLICY

Purpose Statement: Presentation Medical Center believes it has an obligation to make every effort possible to collect for services rendered from all patients who have the ability to pay their account.

Policy Statement: Monthly statements are sent to all patients indicating the account activity for the prior four week period along with any outstanding balances. Statements may include collection messages. Monthly statements are sent to all patients who have a positive, self-pay amount due on an account. No credit balance statements will be sent.

Collection Procedures:

1. Patient receives first statement after patient has after account has been noted as self-pay. If payment is not made with 35 days of statement, a phone call will be placed to Guarantor if there are any questions regarding patient's bill. A second statement will be sent on day 65 with another follow-up phone call regarding patient bill. A third statement will be sent on day 95 informing patient will be going to collections in the next 30 days if there is no attempt at making a payment. Three phone calls or attempts will be made in total over the 125 days if Guarantor has any questions regarding bill or if they would like to set up a pay arrangement.
2. Patients can receive a 10% discount on their bill if payment is made within 30 days of receiving the statement.
3. Delinquent accounts will either be written off, placed with a collection agency or with small claims court. The decision is based on guarantors address and past collection history.
4. If an account has been turned over to collections, and the patient files a Community Care Application and is eligible for Community Care, PMC will withdraw the account from collections. Accounts can be withdrawn from collection 240 days after the patient receives their first bill from PMC.
5. If the patient qualifies for Community Care, PMC will utilized the National Health Service sliding fee schedule and the amount of charges/cost of the bill will be based on the current Medicaid outpatient cost of charge per diem rate.