

## Credit and Collection Policy

**POLICY:** Onslow Memorial Hospital will render medical care to all persons in need regardless of their ability to pay. The Hospital will render medical care to patients at the lowest possible cost.

### **Scope**

The Hospital recognizes that when patients fail to meet their financial responsibility for services provided, it results in shifting costs to other patients and payors.

The Hospital will attempt to recover payment of all funds due for services provided and will follow all proper business practices to ensure those financially responsible satisfy their obligation to the Hospital.

### **Inpatients**

Patients with an emergent health condition requiring admission to the Hospital will be admitted without regard to their ability to pay. Financial arrangements will be made with the patient/family as soon as it is feasible to do so.

### **Elective Procedures to include Out Patient Surgery**

The Hospital will Pre-Admit patients when possible. The method the responsible party intends to use for payment of this account will be verified prior to the patient being cleared for surgery.

The Hospital will extend credit on third party benefits assigned to the Hospital after coverage and pre-certification (if required) are verified.

The Hospital will require advance payment on accounts prior to services being rendered for patients who do not have third party coverage. An advanced deposit of 20% or 35% will be required based on the estimated cost of the procedure.

### **Referred Diagnostic Services**

Prescheduled services will be reviewed and verified prior to services being rendered. Credit will be extended to patients with Third Party coverage.

Patients who do not have third party coverage will be required to make advanced payment.

### **Emergency Room**

The Hospital will render emergency medical services to all patients regardless of their ability to pay.

### **Third Party Billing**

Patients are responsible for notifying the Hospital if they are covered under any policy of health insurance, or if they are otherwise the beneficiary of any health plan or program that would be a source of payment for services provided by the Hospital. The Hospital will file claims for primary and secondary insurance (if applicable) as a courtesy to the patients.

The Hospital will submit claims to all known applicable third party payors on a timely basis, and will make reasonable efforts to collect payments directly from the insurer/payor.

If the insurer/payor does not reimburse the Hospital in a reasonable period of time (as defined by the Hospital to be 60 days from the billing date), the Hospital will turn to the patient/guarantor for payment in full.

The Hospital reserves the right to determine the acceptability of the third party coverage such as private daily indemnity insurance, non-assignable private health insurance plans or out of state welfare plans.

The Hospital will use every means legally available to collect its receivables and, where appropriate, recover its bad debts. Actions that can be taken to recover bad debts may include:

1. Selling debt to another party;
2. Reporting adverse information to a credit agency/bureau; and
3. Taking actions that require a legal or judicial process.

Last Review Date November 2021