Uniform Billing & Collection Policy

PURPOSE: This policy establishes the actions that may be taken in the event of non-payment for medical care provided by Hanover Hospital, including, but not limited to, extraordinary collection actions.

The guiding principles behind this policy are to treat all patients equally with dignity and respect, and to ensure appropriate billing and collection procedures are uniformly followed.

POLICY: It is the policy of Hanover Hospital to ensure that debts owed for medical care are collected in a timely manner, and pursued according to uniform criteria and procedures.

This policy, together with Hanover Hospital’s Financial Assistance Policy, is intended to meet the requirements of applicable federal, state, and local laws.

DEFINITIONS: For the purpose of this policy, the terms below are defined as follows:

- **Bad Debt**: the charges incurred by patients who appear to have the financial resources to pay the charged amount, but have demonstrated an unwillingness to resolve the bill.
- **Extraordinary Collection Actions (ECA)**: Any actions that may be taken by Hanover Hospital, or its agents (i.e. external collection agencies), against a patient related to acquiring payment for medical bills covered under this Policy that require legal or judicial process, involves reporting adverse information to the consumer credit reporting agencies, or selling patients’ debt to a third party.
- **Financial Assistance**: free or reduced healthcare services to individuals based on their financial ability to pay.
- **Underinsured Patient**: An individual who has medical insurance or third-party coverage that is limited in coverage, has high “out-of-pocket” obligations, and/or policy maximums that would exceed their financial ability to pay.
- **Uninsured Patient**: An individual who does not have healthcare coverage by either a third-party insurer, ERISA plan, federal health care program (Medicare, Medicaid, Tricare), workers’ compensation, medical savings accounts, and/or other coverage for all or any part of their medical bill.

PATIENT OBLIGATIONS: Prior to the delivery of any non-emergent healthcare services, the patient is expected to provide timely and accurate information on their insurance status and demographic information, including full name, address and telephone number, date of birth, social security number, and current health insurance coverage.

BILLING PROCEDURES:

- Hanover Hospital will make all reasonable efforts to obtain payment from an insurance company for medical care.
- Hanover Hospital may request payment for any known patient responsibility for medical care (such as co-pays & deductibles) prior to or at the time care is provided (other than emergency care).
• With respect to Emergency Care, Hanover Hospital will request payment for any known patient responsibility AFTER the medical screening has been completed, in order to fully comply with EMTALA regulations.

• If payment is not made at the time medical care is provided, Hanover Hospital will bill the responsible party after receipt of insurance coverage payments.

• Persons who have no health insurance coverage will be eligible for a 30% discount to the gross charges. This discount will be given regardless of income. Reclassification from Self-Pay to another Financial Class or any third party payments received after the accounts have been discounted will result in a reversal of the discount.

• Hanover Hospital will bill for outstanding balances using a minimum of 3 statements over a span of at least 120 days. All statements will include a conspicuous written notice that informs the responsible party about the availability of Financial Assistance, including the telephone number of the department and direct website address where documents may be obtained.

• Hanover Hospital will include a copy of the Financial Assistance Plain Language Summary, with information on how to apply for Financial Assistance, with one of the statements.

**COLLECTION PROCEDURES:**

• Payment plans may be established if balances cannot be paid in full. If more than 3 payments are missed, the account will be forwarded to a collection agency.

• Collection efforts will remain the same even if partial payments are made to accounts. It is the responsibility of the guarantor to inform Hanover Hospital if a payment plan is preferred.

• Accounts could be sent to a collection agency when full payment is not applied to the account by the final statement, more than 3 payments have been missed, or if unable to contact the responsible party regarding payment.

• Accounts with unknown addresses or returned mail may be forwarded to a collection agency at any point in the collection process.

• Accounts with known financial assistance will have balances written off at the allowed charity percentage. For charity allowances less than 100%, balances after the appropriate write-off are collected using standard collection procedures.

• Hanover Hospital, or its agents, may take any and all legal actions to obtain payment for medical services provided including, but not limited to telephone calls, emails, texts, mailing notices, skip tracing, and Extraordinary Collection Actions (ECA’s).

• Collection agencies acting on behalf of Hanover Hospital may engage in ECA’s, such as credit bureau reporting and legal & judicial action, but not before 120 days from the first post-discharge bill after all reasonable efforts have been exhausted.

• Hanover Hospital, or its agents, must provide written notification with information on the Financial Assistance Policy to the responsible party at least 30 days prior to initiating any ECA.

• Prior to initiating any ECA, at least one oral attempt will be made to contact the responsible party at the last telephone number provided, if any. During all conversations, the responsible party will be informed that Financial Assistance may be available under the Financial Assistance Policy.

• Hanover Hospital, or its agents, will not engage in ECA’s before reasonable efforts are made to determine whether a responsible party is eligible for assistance under the Financial Assistance policy.

• If deemed appropriate, accounts at a collection agency can be sent back to the hospital at any time. Guidelines for deeming balances uncollectible will be consistent, regardless of payer.
Patients may apply for Financial Assistance up to 240 days from the first post-discharge statement using the process outlined in the Financial Assistance Policy, regardless of bad debt or collection agency status. All collection actions, including ECA’s, will be suspended until a decision has been made regarding financial assistance as long as they are cooperating with Hanover Hospital or until there is no longer a reasonable basis to believe the patient may qualify for financial assistance.

POLICY AVAILABILITY: Individuals may contact Patient Accounting at 717-316-7877 to request a copy of the Billing & Collection Policy as well as the Financial Assistance Policy, the Financial Assistance Policy Plain Language Summary, and the Financial Assistance application. All documents are available to patients in English and Spanish, and available free of charge at our facility, by mail, and online at www.hanoverhospital.org.

REFERENCES:
POLICY CROSS-REFERENCES:
- Credit and Collection, Administrative Policy
- Financial Aid Policy, Patient Accounting Department Policy