Billing and Collection Cycles Policy

Date Drafted:	Revision Date:	Board of Directors Approval:	Board of Health Approval:
6-3-16	August 25, 2016	August 25, 2016	2016.08.116

Maintenance Steward: CFO, CEO

History: ☒ New ☐ Revised ☐ Archived

Organizational Scope:

☒ Full Agency ☐ Administration ☐ Community Services ☐ Environmental Health ☒ Health Center

Frequency of Review:

☐ Annually ☒ Biennially ☐ 5 Years ☐ As Needed ☐ Other:

Location:

G-Drive: G: → Users → Common → Policies & Procedures

Website: www.lucascountyhealth.com/employee-login/

Hardcopy: TLCHD Policies & Procedures Manual, HR Office

Archived Version(s):

Requisite Signatures

☒	*Board of Health President*	*Date* 8.25.2016
☒	*Health Commissioner*	*Date* 08-25-16
☒	*Chief Financial Officer*	*Date* 8/25/16
☒	*Board of Directors President*	*Date* 8/25/16
☒	*Chief Executive Officer*	*Date* 8/25/16

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Purpose:
Toledo-Lucas County Health Center (TLCHC) will optimize cash flow by billing responsible parties as soon as possible in an effort to collect payment in full.

PROCEDURE:
1. Patients will be asked to remit their responsible portion at the time of visit. A patient statement will be sent monthly.
2. Medicare, Medicaid, and other third party insurances will be billed in a timely manner.
3. Secondary payers will be billed in a timely manner after remittance information is received from the primary payers.

SELF-PAY PATIENTS

1. Returned Patient Statements

For patients with current services or who have made a payment since last mailing the bad address will be removed from the account. An alert will be placed in the system that a new address is needed.

The chart will be checked by the front desk staff of a new address. If a new address is not located in the chart the patient will be called for an updated address. If an updated address cannot be located, the account will potentially be held for 180 days until it is written off and note made in the chart that the patient was called but the listed phone number was not active.

2. Deceased Patients

Regardless of whether the deceased patient has an estate, the account will be adjusted off as bad debt.

INSURANCE

1. Filing Responsibilities

Whenever the practice accepts assignment of benefits, insurance claims will be prepared and submitted by the Billing Department as often as necessary.

2. Monitoring Responsibilities

If claims are not paid after 60 days, the insurance company will be called and claims rebilled.

If claims are not paid after 90 days, a statement will be sent to the patient.

If claims are denied because of patient ineligibility or because a certain service was not covered benefit, the fees will be billed to the patient based on sliding fee scale. The delinquent account procedures will be followed.

Billing and Collection Cycles Policy

MEDICARE

1. Filing Responsibilities

The practice accepts assignment of benefits, claims will be prepared and submitted electronically by the Billing Department as often as necessary.

2. Monitoring Responsibilities

If claims are not paid after 60 days, Medicare will be called and claims rebilled.

If claims are not paid after 90 days, a call will be made to trace the claim.

Co-payments will be billed to the patient; however, if unpaid, amounts will be written off after 180 days.

MEDICAID

1. Filing Responsibilities

Medicaid patients will have Medicaid billing numbers verified prior to claim submission.

Medicaid claims will be sent electronically by the Billing Department as often as necessary.

2. Monitoring Responsibilities

If claims are not paid after 60 days, Medicaid will be rebilled.

If claims are not paid after 90 days, a call will be made to trace the claim.

If claims are denied because of patient ineligibility or because a certain service was not a covered benefit, the fees will be billed to the patient based on a sliding fee scale. The delinquent account procedures will be followed.

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Record of Change

(Required for all policies)

Date of Change	Changes Made By	Changes Made/Notes	Approved By