I. POLICY

It is the policy of Kiowa County Memorial Hospital ("KCMH") and clinic (Greensburg Family Practice) to pursue collection of patient balances from patients who have the ability to pay for services. KCMH will make reasonable efforts to identify patients who may be eligible for financial assistance. Collection procedures will be applied consistently and fairly for all patient regardless of insurance status. All collection procedure will comply with applicable laws and with KCMH's mission. For those patients unable to pay all or a portion of their bill, the applicable Financial Assistance Policy will be followed.

Collection agencies and law firms may be enlisted after all reasonable collection and payment options have been exhausted. Agencies may help resolve accounts where patients are uncooperative in making payments, have not made appropriate payments, or have been unwilling to provide reasonable financial and other data to support their request for financial assistance. Collection agency and law firm staff with uphold the confidentiality and individual dignity of each patient. All agencies and law firms will comply with all applicable laws including HIPAA requirements for handling protected health information.

II. PURPOSE

A. This policy establishes reasonable procedures regarding collection of patient accounts, including actions that may be taken by KCMH or contracted external collection agencies and law firms.

III. SCOPE

A. This policy applies to Kiowa County Memorial Hospital, and Greensburg Family Practice.

IV. POLICY STATEMENTS

A. EXTRAORDINARY COLLECTION ACTIONS

1. Actions that require legal or judicial process including, but not limited to:
    a. Commencing a civil action or lawsuit against the patient or responsible individual;
    b. Garnishing an individual's wages after securing a court judgement;
    c. Attaching or seizing an individual's bank account, other personal property, or other judgement enforcement action permissible under state law after securing a judgement;
    d. Placing a lien on individual's property after securing a judgement provided that placing a lien against an individual's personal injury recovery, settlement, compromise or judgement is not considered an extraordinary collection action (ECA)

Placing a patient's account with a collection agency is not an extraordinary collection action.

V. KCMH REASONABLE EFFORTS TO IDENTIFY PATIENTS ELIGIBLE FOR FINANCIAL ASSISTANCE

A. KCMH will notify individuals that financial assistance is available to eligible individuals at least 30 days prior to pursuing ECAs to obtain payment for the care provided by the hospital by doing the following:

1. Provide written notice to the individual indication that financial assistance is available to eligible individuals, indicating that KCMH intends to initiate or have a third party initiate to obtain payment for the care, and provides a deadline after which ECAs may be pursued and which is no later than 30 days after the date of this written notice;
2. Provide the individual a Plain Language Summary of the Financial Assistance Policy with this written notice; and
3. Make reasonable efforts to orally notify individuals about KCMH's financial assistance policy.

VI. NOTIFICATION PERIOD

A. ECAs for hospital services will not commence for a period of 120 days after the date of the first post-discharge billing statement for the applicable medically necessary or emergency medical care.

VII. FINANCIAL ASSISTANCE APPLICATION PERIOD

A. The financial assistance period begins on the date medical care is provided and ends 240 days after the first post-discharge billing statement or 30 days after the hospital or authorized third party provides written notice of ECAs the hospital plans to initiate, whichever is later. KCMH publicizes the availability of Financial Assistance and makes reasonable efforts to identify individuals who may be eligible. The eligibility criteria and application process is set forth in the applicable Financial Assistance policy.

B. If a patient submits a complete Financial Assistance application during the application period, KCMH will suspend ECAs and make an eligibility determination before resuming applicable ECA activity.

VIII. IDENTIFICATION OF REASONABLE EFFORTS TAKEN

A. Prior to engaging in ECAs, KCMH's Financial Counselor will identify whether reasonable efforts were made to determine whether an individual is eligible for financial assistance. The KCMH Business Office Manager will provide oversight for identification of reasonable efforts made.

IX. FINANCIAL EXPECTATIONS

A. Consistent with this Policy and the Financial Assistance Policy, KCMH will clearly communicate with patients regarding financial expectations as early in the appointment and billing process as process.

1. Patients (or their representatives) are requested to provide complete and accurate insurance information at the time of service and under certain circumstances, as determined by KCMH, within seventy-two (72) hours after treatment or request. Failure to provide insurance information within this timeframe does not, by itself, eliminate insurance coverage or automatically result in self-pay status. However, if insurance information is unavailable at the time of billing, the account may be temporarily classified as self-pay. This classification is administrative only. If valid insurance coverage existed on the date of service and information is later provided within the insurer's timely filing period, then KCMH will: reclassify the account; submit the claim to the insurer; and adjust the patient balance to reflect applicable coverage. If a patient's failure to provide insurance information timely directly results in KCMH missing an insurer's timely filing deadline, and KCMH did not otherwise have sufficient information to submit the claim, the patient may be held responsible for charges to the extent permitted by law or contract.
2. Patients may be required to pay estimated co-pays and deductible the day of services (except in the Emergency Department and other emergent situations) or amounts may be collected after services are provided, based on the current business practices.
3. Patients are generally responsible for paying self-pay balances, including any amounts not paid by insurance companies or applicable third party payers.

X. INSURANCE COLLECTIONS

A. KCMH will maintain and comply with policies and procedures to ensure the timely and accurate submission of claims to all known primary health plans or insurance payers ("Payer") clearly identified by the patient. If KCMH timely receives from the patient complete and accurate information about the Payer but does not timely submit a claim to the Payer and the Payer denies the claim based on that untimely filing, the patient will be responsible for only the amount that the patient would be liable to pay had the Payer paid the claim. However, if KCMH determines that it either timely filed the claims or was provided inaccurate or incomplete information, then the patient will be responsible. Liability insurance is not covered by these Insurance Collections provisions.

B. KCMH shall not refer any bill to a third-party collection agency or attorney for collection activity while a claim for payment of the services is pending with a contracted payer. KCMH may refer a bill to a third-party collection agency or attorney following an initial denial or untimely denial of the claim by a Payer. KCMH will not refer any bill to a third-party collection agency or attorney for collection activity when a claim is denied by a third-party payer due to KCMH's error and such error results in the patient becoming liable for the debt when they would not otherwise be liable. KCMH reserves the right to substantiate that an error has been made and KCMH determines that it has not made an error, then the patient may be held liable. Patients must sign an authorization allowing KCMH to bill the patient's health plan, insurance company or any other third-party payer, and must cooperate with KCMH in a reasonable manner by providing requested information to facilitate proper billing to a patient's health plan or insurance company

C. KCMH makes every reasonable attempt to collect from all known Payers, with whom KCMH has a contract and non-

contracted payers for services provided to assist patient in resolving their bills.

XI. SELF PAY BALANCE RESOLUTION

A. KCMH will employ reasonable procedures in a fair and consistent manner to collect patient self-pay balances, maintaining confidentiality and patient dignity. Financial assistance will be offered to those patients whose income and assets will not allow full payment of services within a reasonable time.
   1. Self-pay collection procedures and process flows are followed by KCMH and must fully complete with this policy. KCMH have developed a streamlined process for patients to question or dispute bills, including a phone number patients may call and an address to which they may send written correspondence. The phone number and address shall be listed on all patient bills and collection notices sent by KCMH. KCMH will make reasonable attempts to return telephone calls made by patients to this number as promptly as possible, but in no event later than five business days after the call is received.
   2. KCMH will consider reasonable payments plans, such as dividing payments over 2 or more months.
   3. If a patient has additional services and addition self-pay balances are owed, KCMH will require increases to the patient's current payment plan, based on the patient's ability to pay.

XII. COLLECTION AGENCY

A. Third-party debt collection agencies may be enlisted only after all reasonable collection and payment options have been exhausted. Agencies may help resolve accounts for services where patients are uncooperative in making payments, have not made appropriate payments, or have been unwilling to provide reasonable financial and other data to support their request for charity care.
B. Collection agency staff will uphold the confidentiality and individual dignity of each patient. All agencies will meet all HIPAA requirements for handling protected health information.
C. When reviewing the account for referral to a collection agency, the responsible person will confirm that:
   1. There is a reasonable basis to believe that the patient owes the debt
   2. All known Payers have been properly billed such that any remaining debt is the financial responsibility of the patient. Where the patient has indicated an inability to pay the full amount of the debt in one payment, consideration of a reasonable payment plan is required provided that KCMH may require the patient to provide reasonable verification of the inability to pay the full amount of the debt in one payment.
   3. The patient has been given a reasonable opportunity to submit an application for Financial Assistance. Particular attention should be given when a patient is uninsured or is currently on Medical Assistance, or other relief based on need.
D. If a patient submits a complete application for Financial Assistance after an account has been referred for collection activity, KCMH will suspend ECAs until the patient's application has been processed and notified the patient of KCMH's determination.
E. KCMH and its third-party partners do not credit report patient medical debt.
F. KCMH does not sell outstanding medical debt.

XIII. LEGAL ACTION

A. KCMH may pursue legal action against patients who keep insurance payments or settlement proceeds related to the medical services, patients who refuse to pay a bill and do not appear to be eligible for financial assistance or have not cooperated in the process to make that determination. Legal follow-up and commencing a lawsuit is appropriate and permitted subject to the following:
   1. Authorization to take legal action against a patient for the collection of medical debt will be provided on a case by case basis.
   2. Legal action will not be filed against any particular patient to collect medical debt until KCMH determines that:
      a. There is a reasonable basis to believe that the patient owed the debt
      b. All known Payers have been properly billed;
      c. Where the patient has indicated an inability to pay the full amount in one payment, KCMH has offered the patient a reasonable payment plan. The patient has been given a reasonable opportunity to submit an application for Financial Assistance if the facts and circumstances suggest that the patient may be eligible for Financial Assistance including, that the patient is uninsured or is enrolled in Medical Assistance or eligible for other relief based on need.

XIV. ENFORCEMENT

A. It is the policy of KCMH, through adoption of the Policy by the applicable governing boards and by the Board of Trustees or KCMH, that this policy will be enforced for all collection staff, collection agencies and attorneys. Any abusive, harassing, or misleading language or conduct by its employees responsible for collecting medical debt from patients and from its debt collection agencies and attorneys and their respective agents and employees will be addressed through correct action procedures.

XV. EQUAL OPPORTUNITY

A. When making decisions throughout the collection process, KCMH is committed to upholding the multiple federal and state laws that preclude discrimination on the basis o race, sex, age, religion, national origin, marital status, sexual orientation, disabilities, military service, or any other classification protected by federal, state or local laws.

XVI. CONFIDENTIATILITY

A. KCMH staff will uphold the confidentially and individual dignity of each patient. KCMH will meet all HIPAA requirements for handling personal health information.

XVII. RELATED DOCUMENTS

A. Financial Assistance Policy
B. Plain Language Summary
C. Financial Assistance Application

Revised in accordance with 501® of the Internal Revenue Code, effective January 1, 2016.