SUBJECT COLLECTION PROCEDURES

- **PURPOSE** To maintain adequate cash flow and consistent application of financial policies.
- POLICY Before surgery, patient's insurance information is collected and benefits are verified. Patient deductibles and known copays will be calculated, and patient is notified of their expected payment on the day of service. Front desk personnel will collect amount due upon patient's arrival for procedure. Methods of payment are cash, check or credit card. Self pay patients will be expected to pay the entire estimated amount on the day of service.

After surgery is performed, appropriate charges will be entered and claim generated, if appropriate. Once insurance has processed, a balance bill statement will be generated to the patient for any remaining responsibility. If self pay patients have any remaining responsibility, a statement will be generated.

Statements will be sent out monthly. At the point the account reaches 45 days with no activity after it becomes the patient's responsibility, it will be turned over to MNET for progressive collection attempts.

MNET will allow another 45 days for the patient to make a payment or arrangements before turning the account over to collections within MNET.

Payment plans may be arranged at the discretion of the account receivable department; however, adequate regular payments must be received in order to keep the account in good standing.

If payment plans are set up by the patient through Waystar, the patient is responsible for the fee to set up the plan.

Patients with bad debt history in the facility must pay their old balance in full, and any anticipated current responsibility, before they can receive additional services.