



PURPOSE:

It is the policy of the CBO that accounts assigned to the responsibility of the patient will receive a series of statements and collection notices. Failure to respond will cause the account to be considered for external collection efforts and forwarded to a collection agency.

COLLECTIONS PROCEDURE:

1. Patients will receive four statements.

During that period, if resources allow, telephone calls will be placed to patients urging them to pay or make contact with the CBO.

2. Patient balances will be considered for transfer to the collection agency if the following are applicable:
 - a. Patient balance is not paid in full;
 - b. Patient balance is outstanding 120 days from date of patient notification of responsibility;
 - c. Patient has received four statements and/or collections notices;
 - d. Patient has failed to make payments according to the plan to which he/she agreed or to otherwise meet commitments made to CBO staff engaged in collection activities.
3. If a patient balance remains after patient follow-up, and/or a minimum of 120 days has passed from the date of posting, the account will be turned over to a collection agency. The account will be sent to the collection agency using the appropriate adjustment code. The patient account will be flagged as bad debt.

PAYMENT PLANS PROCEDURE:

1. CBO staff can create payment plans for patients unable to make payment in full.
2. Balances paid monthly will follow the guidelines provided by the CBO Director.
3. Details regarding the payment plan will be entered into Cerner following the Formal Payment Plan process.
4. Delinquent accounts are followed up on by the Financial Counselors, assigned by alpha.
5. Patients with delinquent accounts of one month are able to make up the missed payment. If he/she fails to meet this schedule the account is no longer eligible for a payment plan and must be paid in full. If the account is greater than 120 days past due, it is eligible for collection agency placement.