Collection Policy

A. Introduction

Charges for services provided by St. Mary’s Medical Center (hereinafter SMMC) are regulated and approved by the State of West Virginia Health Care Cost Review Authority. “Self Pay” balances are defined as charges due from patients or their guarantors, whether the amounts are applicable coinsurance and/or deductible amounts after insurance benefits are paid or charges due in full from uninsured patients. SMMC will make available for review by any patient or guarantor that requests:

- Information about charges, in a manner in which a reasonable person with a seventh grade education could understand, and
- Information about the relationship between our charges and the costs of caring for our patients.

The medical center’s core value of “Stewardship” requires all reasonable efforts be made to ensure amounts due are paid in full when due.

The medical center’s core value of “Compassion” requires that each patient be treated with dignity, with tolerance and with the understanding of individual circumstances. SMMC has committed to provide substantial uncompensated care to qualifying patients.

It is the intent of this policy to balance the core values of “Stewardship” and “Compassion” in collecting balances due from patients. It is the policy of SMMC that all patient balances are to be pursued fairly, consistently and according to the Medical Center’s core values.

B. Patient Communications

SMMC will respond promptly to patients questions about their bill, and make available financial counseling. In addition, all personnel responding to billing questions will be required to have knowledge of the community’s resources for financial assistance and financial counseling.
C.  **Statement / Notice to Patients**

When a final balance due on an account is determined, a statement will be sent to the patient with notice that payment is due, and listing a summary of the charges billed.

If payment is not received, statements of balance due will be sent to the patient monthly. Accounts greater than 60 days past due will have requests printed on the statements, asking the patients to contact the business office to discuss the account. All staff will be instructed in the medical center’s Standards of Behavior to ensure each inquiry will be treated with courtesy and dignity. In addition, the staff must have knowledge of the SMMC uncompensated care policy, and refer potential calls to the charity care clerk. To ensure equitable treatment of our indigent and needy population, the SMMC Uncompensated Care Policy is attached as “Sub Policy A” and made a part of this policy and procedure.

If it is clear that the patient/guarantor would not be a candidate for uncompensated care, the patient/guarantor will be notified that, absent a prompt payment, the account is subject to placement with a collection agency for follow-up.

D.  **Agency Placements**

Accounts which remain unpaid, with no payment arrangements after 120 days from due date and records support that at least three statements have been mailed, will be scheduled for placement with a collection agency or law firm for collection. If the account remains unpaid after 12 billing cycles, the account will be removed from SMMC’s accounts receivable and be classified as “Bad Debt”.

SMMC may, from time to time, modify the account placement parameters as necessary. For example, it is standard practice to place an account with an agency when a statement is returned due to an invalid address.

SMMC will advise any agency in receipt of accounts that reasonable and standard collection practices are expected. St. Mary's Medical Center, its collection agencies and law firms may report to credit bureaus, commence civil litigation, pursue wage garnishments, place a lien on real or personal property, attach or seize an individual’s bank account or any other personal property, and other similar collection actions.