

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.