PURPOSE:

This Policy establishes reasonable procedures regarding collection of patient accounts, including actions that may be taken by Lakeland Regional Medical Center (LRMC) or contracted external collection agencies.

POLICY:

After our patients have received services, it is the policy of LRMC to bill patients and their applicable payers in a timely and accurate manner. During this billing and collection process, LRMC staff will be committed to providing quality customer service and timely follow up on all outstanding accounts. It is the policy of LRMC to pursue collection of patient balances from patients who have the ability to pay for services, however, LRMC will make reasonable efforts to identify patients who may be eligible for financial assistance. Collection procedures will be applied consistently and fairly to all patients regardless of insurance status. All collection procedures will comply with applicable laws. For those patients unable to pay all or a portion of their bill, the applicable Financial Assistance Policy will be followed.

PROCEDURES:

Patients shall be registered in LRMC’s Information System in a manner that ensures the capture of the information necessary to effectively bill for services rendered. Patients are responsible for understanding their insurance coverage and for providing needed documentation to aid in the insurance collection process. After services are rendered, the patient’s or guarantor’s insurance (if any) shall be billed. In an effort to assist patients in resolving their bills, LRMC makes every reasonable attempt to collect from all known contracted and non-contracted payers for services provided. If a patient has no insurance and was registered self-pay, the bill for services will be adjusted in accordance with LRMC’s Financial Assistance Policy. LRMC will make reasonable efforts to collect from an insurance carrier prior to billing the patient for services rendered. If an outstanding balance remains after reasonable efforts are made to collect from the insurance carrier, LRMC shall seek assistance from the patient to contact the insurance carrier in order to resolve the outstanding claim. If these efforts are not successful then the account may be changed to a self-pay account and LRMC will bill the patient or guarantor for the balance which may be adjusted in accordance with LRMC’s Financial Assistance Policy. All billed patients will have the opportunity to contact LRMC regarding financial assistance or discuss a payment arrangement for their accounts at any time in the billing process.

Patient Statements and Collection Efforts

Through the use of billing statements, letters and phone calls, LRMC will take diligent follow up actions to contact patients to resolve outstanding accounts. At least five separate statements for collection of balance after insurance and self-pay accounts will be mailed to the last known address of each patient requesting the account balance be paid within 30 days. For self-pay patients, statements will be generated at day 10, day 28, day 56, day 84, and day 115 from discharge. For patients with balances after insurance, statements will be generated at day 5, day 28, day 56, day 84, and day 115 from receipt of remittance from the insurance carrier. It is the patient’s obligation to provide a correct mailing address at the time of service or upon moving. If an account does not
Patient Statements and Collection Efforts Continued

have a valid address, alternative methods for locating the patient will be utilized. If after exhausting reasonable efforts over a period of up to 120 days to collect a balance after insurance or self-pay balance, LRMC may refer the account to a third-party agency for collection.

Payment Plans

LRMC does not offer prompt payment discounts, however, monthly payment plans are available and will be limited to twenty-four (24) months. The annual payment for a payment plan will not exceed 10% of the patient’s household income. All outstanding account balances will be combined into one (1) payment plan upon patient’s or guarantor’s request. When additional payment obligations are incurred, they may, upon request, be added to the existing payment plan and the payment plan amount will adjust accordingly. The minimum required monthly payment is $25 or 1/24th of the account balance, whichever is greater.

Outside Collection Agency

A third-party debt collection agency may be used only after all reasonable collection and payment options have been exhausted. LRMC shall not refer any bill to a third-party collection agency for collection activity while a claim for payment of the services is pending with a contracted payer. The collection agency 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. The collection agency may report adverse information to a consumer credit reporting agency as a result of patient non-payment but if it is determined that the patient is eligible for financial assistance any adverse information reported will be retracted. The collection agency will uphold the confidentiality of each patient and will comply with all applicable laws including HIPAA requirements for handling protected health information.

Prohibited Collection Activities

LRMC will not engage in any of the following collection activities for any patients that qualify under the hospital’s Financial Assistance Policy.

- Placing a lien on an individual’s property
- Foreclosing on an individual’s real property
- Attaching or seizing an individual’s bank account or any other personal property
- Commencing a civil action against an individual
- Causing an individual’s arrest
- Causing an individual to be subject to a writ of body attachment
- Garnishing an individual’s wages

Policy Availability

Electronic copies of LRMC’s Billing and Collection Policy, Financial Assistance Policy and our Financial Assistance Application form can be found on our website: http://mylrh.org. You can also contact our Business Office at (863) 687-1196 and request copies of policies be mailed to you or to discuss the Charity Care application and eligibility process. Paper copies of our policies and Charity Care application form can be obtained at our Business Office located at 1324 Lakeland Hills Boulevard, Lakeland, FL.