PATIENT BILLING AND COLLECTIONS POLICY

Originator: Patient Accounts

Approved By: John Maschger, Assoc Administrator Revenue Cycle Operations

Policy: Truman Medical Centers (TMC) is committed to adhering to billing and collections processes compliant with all state and federal laws, regulations, guidelines and policies. TMC shall make reasonable efforts to determine eligibility for financial assistance by 120 days from the first post-discharge billing statement prior to initiating any Extraordinary Collection Action (ECA) to obtain payment for care.

Scope: ☐ Corporate ☐ Facility ☑ Department Patient Accounts

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<th>Hospital Hill</th>
<th>Lakewood</th>
<th>Long Term Care</th>
<th>University Health Surgery Center</th>
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Procedure:
I. Billing Patient Balances
   A. TMC or its contracted vendor will send four statements over a course of 120 days from the date of the patient’s first post-discharge statement prior to considering placing unpaid balances with a collection agency.
   B. Bills and statements will include notification of TMC’s Financial Assistance Policy (FAP).
      1. The front of the statement shall carry a brief message referencing the catchment area (Kansas City or Jackson County, Missouri), the phone number to call for information, and the full URL for online information including the application form.
      2. The back of the statement shall carry a plain language summary of the FAP.
   C. The final statement shall include a message indicating that TMC intends to place the account with a collection agency 30 days from the statement date.
   D. Placement with a collection agency will occur if the patient does not pay the account in full, make a payment arrangement commensurate with the balance as determined by TMC and approved by an authorized representative of TMC, or qualify for financial assistance the FAP.
   E. 150 days from the placement of the account with a collection agency, the patient will be contacted via a letter and a phone call from the collection agency or TMC to notify the patient that in 30 days the collection agency or TMC will report adverse information about the patient to a consumer credit reporting agency or the credit bureau. A copy of the Plain Language Summary of the FAP will accompany the letter.

II. Financial Assistance Application
   A. TMC, a contracted vendor or the collection agency will notify patients about financial assistance and the financial assistance application in the course of each conversation to collect payment for care.
B. A financial assistance application and the financial assistance program requirements form shall be mailed to patients by the contracted vendor, TMC or a collection agency. Patients will also be informed of other methods of obtaining the financial assistance application, including:
   a. Obtaining an application in person at any of the Financial Counseling Center locations, including:
      1) Hospital Hill- 2301 Charlotte, 4th floor; Cardiology-5th floor; GI-3rd floor; OB-6th floor.
      2) University Health-2101 Charlotte, 3rd floor.
      3) Lakewood-7900 Lee’s Summit Rd, Lobby Bess Truman entrance.
      4) Behavioral Health, Canvas Building-300 W 19th Ter., KC, MO 64108
      5) Lakewood Counseling Center- 300 SW 2nd, Lee’s Summit, MO 64063
      6) Entry points of the hospital facilities: Main Lobbies and Emergency Departments
   b. Requesting to have an application mailed to them by calling (816) 404-3040.
   c. Downloading an application through the TMC website:
      www.trumed.org/patients-visitors/financial-services/financial-counseling

C. Financial assistance applications may be submitted up to 240 days from the first post-discharge billing statement.

D. If a patient submits an application that is denied due to being incomplete, the following events will occur:
   1. If any ECAs have been initiated, they will be immediately suspended.
   2. Patient will be notified in writing of any additional information needed to complete the application deficiencies.
   3. Patient will have 30 days to complete the application process, or respond with any missing documentation that resulted in the initial denial of the application.

E. A complete financial assistance application will be processed as followed:
   1. Determination will be made of the patient’s qualification for financial assistance.
   2. The patient will be notified in writing of the approval or denial.
   3. Payments that have made on accounts that are eligible for financial assistance will be refunded or transferred to other outstanding account balances.
   4. The patient will be issued a revised billing statement reflecting the balance due, if any.
   5. The hospital will take all reasonably available measures to reverse any ECAs that may have been initiated on the account.
Definitions:

Extraordinary Collection Actions (ECA): Certain actions taken by a hospital to obtain payment of a bill for care covered under the hospital’s financial assistance policy, including but not limited to selling an individual’s debt to another party; reporting adverse information about the individual to consumer credit reporting agencies or credit bureaus; deferring or denying or rewiring payment before providing medically necessary care because of an individual’s nonpayment of one of more bills for previously provided care; actions that require a legal or judicial process, including placing a lien, foreclosing on property, attaching a bank account, etc.