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| Patient/Client Collections – ILAH | **Last Revision:** | August 2015 |
| **Last Reviewed:** | August 2015 |
| **Applies to the following THA Group of Companies:** | Independent Life At Home |
| **Located in the following THA Manual:** | Administrative Policies & Procedures  Finance |

#### **POLICY**

It is the organization’s policy to collect all balances due from patients in a manner consistent with applicable laws and regulations.

**PROCEDURE**

1. All ILAH patients with a balance due will receive a series of telephone calls and reminder letters from Finance at the following intervals:
   1. If no payment has been received, a phone call will be made two weeks from the first date of service and every week thereafter.
   2. The first letter will be sent 30 days from the initial date of service.
   3. The second and final letter will be sent 60 days from the initial date of service.
   4. A finance charge will be assessed on accounts greater than 60 days past due.
2. If the patient does not communicate with Finance; Finance will work with the Director of Life Care Services to arrange a payment plan or pick up a check.
3. Except for emergencies, patients with accounts more than 45 days overdue must resolve outstanding balances with billing office prior to being seen by a caregiver.
4. Write offs
   1. Patient balances of less than $25.00 will be written off.
   2. Any balances above $25 may only be written off on the recommendation of the billing manager and the approval of the CFO and President & CEO. In such cases, balances are written off only because of financial hardship to the patient, professional courtesy or other extenuating circumstances. The basis for writing off a balance must be documented in the billing record.
5. Referral to collection agency
   1. Accounts that have balances remaining due for more than 60 days, and that have received all collection letters, are eligible to be referred for outside collection.
   2. The billing manager who will recommend appropriate accounts for collection should review all such accounts. This will include, at a minimum, verifying that the appropriate collection letters were sent to the patient.
   3. Accounts must be reviewed and approved for collection by the organization’s CFO and CEO prior to being submitted to collection.