

UW Medicine

PATIENT FINANCIAL SERVICES
DEPARTMENTAL POLICIES AND OPERATIONAL PROCEDURES

Policy/Procedure Name

UWMC and HMC Billing & Collection Policy

PURPOSE:

The combined mission of the University of Washington Medical Center (UWMC) and Harborview Medical Center (HMC) is to improve the health of the public by advancing medical knowledge, providing outstanding primary and specialty care to the people of the region, and preparing tomorrow's physicians, scientists and other health professionals. To accomplish this mission the medical centers require a collection policy that:

- A. Fosters timely payment of the services provided.
- B. Is sensitive to each patient's individual financial circumstances.
- C. Offers flexible and sufficient options for patients to meet their financial obligations.

POLICY:

Insurance Billing:

UWMC and HMC Patient Financial Services will bill state, federal and other commercial insurance carriers. We do not hold the patient responsible for the bill until we have resolved all issues with the insurance carriers, including appeals of denials. Whenever possible, we act as a patient advocate to secure insurance payment before the claim is changed to self-pay.

- Self-pay accounts are due within 30 days from the receipt of first statement unless other arrangements are made.
- Self-pay balances after insurance are due within 30 days from the receipt of first statement.
- UWMC and HMC send statements every 30 days in a 120 day dunning cycle.
- During this time, patients have the opportunity to make payment in full or financial arrangements which include:
 - Payment plan
 - Financial Assistance (charity)
 - Dispute of charges
 - Providing additional information for billing another payer or insurance
- Quality of care and billing accuracy issues are to be resolved as quickly as possible and prior to enforcing collection standards.
- Out-bound calls are placed in an effort to obtain payment or make financial arrangements.
- The fourth statement is a "Final Notice" informing the guarantor that their account will be placed with an outside collection agency if payment or arrangements for payment are not made within the next 30 days.

- Failure to respond or to send payment in full may result in placement with the collection agency.
- All patients who indicate financial hardship are to be screened for Financial Assistance and/or possible Medicaid coverage. Financial Assistance may be granted at any time, even after collection agency assignment but must be requested prior to a legal judgment.

Options Available for Patient Pay Balances:

UWMC and HMC accept cash, check or credit card for payment. Credit card payments are accepted by phone or by using the on-line bill pay option. Patient portions are due upon receipt of initial post-discharge billing statement unless payment arrangements are made or a Financial Assistance application has been submitted.

Payment Plans:

Payment arrangements are established upon patients' request with the Patient Financial Services Department. Typically, this would allow up to 12 months of equal payments or up to 24 months if approved circumstances apply.

True Self Pay (uninsured) Discount:

There are two types of true self pay (uninsured) discounts offered for facility charges on medically necessary services. The discount is applied by Patient Financial Services and is shown as an adjustment on the patient's statement. The discount is applied when a patient has no insurance and is not eligible for Financial Assistance.

- UWMC and HMC have a 30% discount when uninsured patients are seen in the emergency department.
- UWMC has a 10% discount when uninsured patients are seen outside the emergency department.

Medical Liens:

When a patient is a victim of an accident or other wrongful act, their health insurance company will generally not pay for medical services once it is determined that another party will ultimately be liable. In addition, a patient may not have insurance but may be seeking settlement from the responsible party. In these situations UW Medicine may file a lien against the future personal injury settlement. A lien is a form of security interest over real or personal property to secure the payment of a debt.

Account Placed in Collections:

Activities may include:

- An initial notice which informs the guarantors they have 30 days to respond before credit reporting: credit reporting occurs on the 45th day.
- Telephone calls.
- Legal judgments with subsequent wage garnishment.
- Medical liens.

Additional information regarding collection accounts:

- PFS must authorize any legal action taken on any account.
 - PFS will not authorize suit if there is not meaningful employment.
 - Legal action will be taken on behalf of UWMC and HMC by a "Special" Assistant Attorney General on retainer by the agency.
- Accounts that have been placed with either of two contracted agencies for one year are placed with the other agency as a secondary placement, unless payment arrangements have been made or legal judgment has been obtained.

- Secondary placements are returned after an additional year if they have had no activity within the preceding 90 days.
- Accounts returned from secondary placement are deemed uncollectable and removed from our Collection Agency A/R.
- Unpaid balances will remain on the guarantor's credit history for seven years or for ten years if a legal judgment was obtained.

Extraordinary Collections Actions (ECA):

Patient accounts shall not be subjected to any ECAs¹, either by UWMC, HMC or the collection agency to which they are assigned, until the following have occurred:

1. Reasonable efforts have been made to determine Financial Assistance eligibility. Reasonable efforts include the following²;
 - a. Patient is offered a Financial Assistance plain language summary and application prior to discharge and offered assistance in completing the application;
 - b. If an incomplete application is received, written notification of missing information/documents is sent to patient including notification of any ECAs Hospital (or Hospital's agent) may initiate or resume if application or payment is not received by a specified deadline³;
 - c. All billing statements contain a conspicuous notice regarding the availability of Financial Assistance with a phone number to call for information/ assistance and the direct web site address where copies of the Financial Assistance documents may be obtained;
 - d. Completed Financial Assistance applications are processed in a timely manner and patient is notified in writing of the determination, provided an updated billing statement if a balance remains, and refunded if payment has been made in the approved period that is supported by an application.
 - e. Hospital may meet the reasonable efforts requirement by determining a patient eligible for the most generous Financial Assistance available based on information that established the patient's eligibility for one or more means-tested public programs.
 - f. Hospital may choose to grant Financial Assistance to a patient who has failed to fully provide the information/documentation requested on the Financial Assistance application.
2. 120 days have elapsed since the first post-discharge billing statement; and

¹ ECAs include placing liens on an individual's property, reporting individual to a credit agency, garnishing wages and requiring payment or deposit prior to providing medically necessary care.

² Hospital will not have made reasonable efforts to determine eligibility simply by obtaining a signed waiver from the patient, nor will Hospital be considered to have made reasonable efforts if Hospital determines ineligibility based on information it has reason to believe is unreliable or incorrect or is obtained from the patient under duress or through coercion.

³ Any ECAs initiated are suspended.

3. The following notification requirements have been met (at least 30 days prior to initiation of the ECA):
 - a. Written notification sent notifying of Financial Assistance availability;
 - b. Provision of a Financial Assistance plain language summary ;
 - c. Notice of the action(s) to be taken upon nonpayment have been provided;
 - d. Notice of the date after which the action(s) will be taken if payment is not received; and
 - e. Attempts made to verbally discuss the Financial Assistance policy and application with the patient.
4. Credit reporting may occur 180 days after the first post-discharge billing.
5. Lawsuits for past due balance may not be filed prior to 240 days after the first post discharge billing.
6. Sufficient effort has been made to determine patient's eligibility for Financial Assistance.

Equal Treatment of All Patients/Guarantors:

UWMC and HMC process patient accounts in a manner consistent with this collection policy. Under no circumstances are age, race, color, religion, sex, sexual orientation or national origin considered in applying this policy.

A copy of this policy, as well as copies of the Financial Assistance Policy, Financial Assistance Plain Language Summary and Financial Assistance application may be obtained by contacting:

Harborview Medical Center (HMC)
Financial Counseling
325 9th Ave; Mail Stop 359758
Seattle, WA 98104-2499
206.744.3084
M-F 8:00 a.m. – 4:30 p.m.

UW Medical Center (UWMC)
Financial Counseling
1959 NE Pacific Street, Mail Stop 356142
Seattle, WA 98195-6142
206.598.3806
M-F 8:00 a.m. – 4:30 p.m.

HMC & UWMC
Patient Financial Services
P.O. Box 95459
Seattle, WA 98145-2459
206.598.1950 or 1.877.780.1121
FAX 206.598.2360
M-F 8:00 a.m. – 4:30 p.m.

Website: <http://www.uwmedicine.org/financialassistance>