



PIONEER MEDICAL CENTER

P.O. Box 1228, Big Timber, MT
406-932-4603 Fax: 406-932-5468

POLICY and PROCEDURE		
Title	Billing and Collections Policy	
Manuals	ADULT DAY CARE - ORGANIZATION	HOSPICE-ORGANIZATION
	ASSISTED LIVING FACILITY-ORGANIZATION	PUBLIC HEALTH- ORGANIZATION
	CRITICAL ACCESS HOSPITAL-ORGANIZATION	RURUAL HEALTH CLINIC-ORGANIZATION
Approved By	Date: <u>9/23/2019</u> By: <u>Brad Howell</u> Title: <u>CEO</u>	

Highlights

Policy Statement

The policy of Pioneer Medical Center is to efficiently manage the facility's accounts receivable and provide a process of timely collection of accounts due to PMC.

Billing

Procedure

1. In order for the system to generate a bill, patients will be registered in Cerner and an account will be created in AS400. Charges and diagnoses will be entered on patient accounts in a timely manner by the PMC billing staff.
2. Pioneer Medical Center will submit bills to all insurance carriers on behalf of the guarantor; however, it is the guarantor's responsibility to provide Pioneer Medical Center with the necessary insurance information. If the guarantor is unable to provide the necessary information, the account will be entered into the system as self-pay.
3. As part of the in-patient admissions process, a representative from Patient Financial Services will visit with all inpatient and/or family members to determine insurance coverage. For patient's in Observation, or Inpatient's that have insurance other than Medicare or Medicaid, a billing representative will call the insurance company to verify coverage and to determine if the stay requires prior authorization for payment. For all emergency room patients, a representative from PMC will obtain insurance information before the patient leaves the facility. For all clinic Medicaid patients, it is the expectation that the patient eligibility and passport information is reviewed prior to the patient being seen.
4. Each business day, an electronic file of unbilled claims will be uploaded to the claims clearinghouse. Claims are forwarded to the appropriate payer electronically or printed to paper and mailed to the carrier by the clearinghouse. Workman's Comp claims are billed hard copy with copies

Insurance Verification

Claims Submission



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Claims Processing

of the corresponding medical record. Secondary insurance claims that do not automatically transmit from the primary insurance are billed hard copy with a copy of the Explanation of Benefits from the primary insurance carrier.

Patient Payments

5. Once a payment or denial notice is received from the insurance carrier, the remaining balance will be billed to the secondary insurance, or if there is none, it will be converted to a self-pay balance.

6. Pioneer Medical Center has the following options for patients once their self-pay balance is determined:

- Assistance with applications to apply for State of Montana financial assistance programs (i.e. Medicaid, HMK, etc.)
- Assistance completing the application for Pioneer Medical Center's Patient Financial Assistance Program
- A 20% self-pay prompt pay discount on all self-pay balance within 30 days of determining the self-pay balance.
- Help setting up a short-term payment agreement with Pioneer Medical Center. The payment timeline from the first statement date is listed below:
 - 3 months \$5.00-\$500.00
 - 6 months \$501.00-\$1,000.00
 - 9 months \$1,001.00-\$2,000.00
 - 12 months \$2,001.00+

○ Referral to the Patient Loan Program Partnership with Opportunity Bank.

○ PMC will discount the outstanding balance by 10% if you pay off your balance with an approved loan through Opportunity Bank.

○ If you default on your loan, PMC will add this discount back to the outstanding balance, and the account will immediately be sent to Centron Credit System and the account will be placed in Bad Debt with Pioneer Medical Center.

Statements

7. The facility sends out billing statements for all self pay accounts (which includes insurance co-pays and deductibles) monthly to the guarantor listed on the account. Billing services are outsourced to Mailing Technical Services. Detail bills of accounts are provided to anyone upon request. Payments may be made to the facility by cash, money order, check or credit card or electronic deposit. Payments may also be made electronically using E-Pay.

**Long Term
Care/Assisted Living
Billing**

**Patient Business
Services**



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Collections

8. Long term care accounts and Assisted Living accounts will be billed manually at the beginning of each month.
 9. Guarantor's that have accounts with self-pay balances that have received at least three statements from the Pioneer Medical Center and have not paid their account in full or agreed to one of Pioneer Medical Center's payment options, will be sent to Patient Business Services to work the account.
 10. If Patient Business Services is not successful arranging payments with the patient, they will send the account to Centron Credit Systems and the account will be place in Bad Debt with Pioneer Medical Center.
 11. Any exceptions to the policy must be approved by the CEO.
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