

	<p><b>POLICY TITLE: Billing and Collections</b></p>
<p><b>MANUAL:</b> Patient Accounting</p>	<p><b>POLICY OWNER:</b> Patient Accounting</p>
<p><b>ORIGINATION DATE:</b> 7/2022</p>	<p><b>FINAL APPROVAL DATE:</b> 8/2022</p>

**SCOPE**

This policy applies to University Medical Center of Southern Nevada (UMCSN) and its wholly-owned subsidiaries.

**PURPOSE**

This policy establishes University Medical Center of Southern Nevada’s (UMCSN) principles and guidelines for patient billing and collection practices.

**POLICY**

To provide clear and consistent guidelines for conducting billing and collections functions in a manner that promotes compliance, patient satisfaction, and efficiency. Through the use of billing statements, written correspondence, and phone calls, University Medical Center will make diligent efforts to inform patients of their financial responsibilities and available Financial Relief Program options, as well as follow up with patients regarding outstanding accounts. All patient’s will be treated fairly, with dignity, compassion and respect.

**PROCEDURE**

Billing Practices

Insurance Billing

- A. For all insured patients, University Medical Center of Southern Nevada will bill applicable third-party payers (as based on information provided by or verified by the patient) in a timely manner.
- B. If a claim is denied (or is not processed) by a payer due to an error on our behalf, University Medical Center of Southern Nevada will not bill the patient for any amount in excess of what the patient would have owed had the payer paid the claim.
- C. If a claim is denied (or is not processed) by a payer due to factors outside of our organization’s control, staff will follow up with the payer and patient as appropriate to facilitate resolution of the claim. If resolution does not occur after extensive follow- up efforts, University Medical Center of Southern Nevada may bill the patient or take other actions consistent with current regulations and industry standard



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Patient Billing

- A. All uninsured patients will be billed directly and timely, and they will receive a statement as part of the organization's normal billing process.
- B. For insured patients, after claims have been processed by third-party payers, University Medical Center of Southern Nevada will bill patients in a timely fashion for their respective liability amounts as determined by their insurance benefits.
- C. All patients may request an itemized statement for their accounts at any time.
- D. If a patient disputes his or her account and requests documentation regarding the bill, staff members will provide the requested documentation in writing within 10 days (if possible) and will hold the account for at least 30 days before referring the account for collection.
- E. University Medical Center of Southern Nevada may approve payment plan arrangements for patients who indicate they may have difficulty paying their balance in a single installment.
- F. With the approval of the Director, Patient Accounting has the authority to make exceptions to this policy on a case-by-case basis for special circumstances.
- G. University Medical Center of Southern Nevada is not required to accept patient-initiated payment arrangements and may refer accounts to a collection agency as outlined below if the patient is unwilling to make acceptable payment arrangements or has defaulted on an established payment plan.

Collections Practices

- A. In compliance with relevant state and federal laws, and in accordance with the provisions outlined in this Billing and Collections Policy, University Medical Center of Southern Nevada may engage in collection activities—including extraordinary collection actions (ECAs)—to collect outstanding patient balances.
- B. General collection activities may include follow-up calls on statements or letters.
- C. Patient balances may be referred to a third party for collection. When There is a reasonable basis to believe the patient owes the debt.
- D. All third party payers have been properly billed, and the remaining debt is the financial responsibility of the patient. University Medical Center of Southern Nevada shall not bill a patient for any amount that an insurance company is obligated to pay.
- E. University Medical Center of Southern Nevada will not refer accounts for collection while a claim on the account is still pending payer payment.
- F. University Medical Center of Southern Nevada will not refer accounts for collection where the claim was denied due to a University Medical Center of Southern Nevada error. However, University Medical Center of Southern Nevada may still refer the patient liability portion of such claims for collection if unpaid.
- G. University Medical Center of Southern Nevada will not refer accounts for collection where the patient has initially applied for Financial Relief or other University Medical Center of Southern Nevada sponsored



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program and University Medical Center of Southern Nevada has not yet notified the patient of its determination (provided the patient has complied with the timeline and information requests identified during the application process).

Reasonable Efforts and Extraordinary Collection Actions (ECAs).

- A. Before engaging in ECAs to obtain payment for care University Medical Center of Southern Nevada must make certain reasonable efforts to determine whether an individual is eligible for Financial Relief under our Financial Relief policy:
- B. ECAs may begin only when 120 days have passed since the first post-discharge statement was provided.
- C. After making reasonable efforts to determine Financial Relief eligibility as outlined above University Medical Center of Southern Nevada (or its authorized business partners) may report adverse information to credit reporting agencies and/or credit bureaus.
- D. If a patient has an outstanding balance for previously provided care, University Medical Center of Southern Nevada may engage in the ECA of deferring, denying, or requiring payment before providing additional medically necessary (but non-emergent) care.

Financial Relief

- A. All billed patients will have the opportunity to contact University Medical Center of Southern Nevada regarding Financial Relief for their accounts, payment plan options, and other applicable programs.
- B. University Medical Center of Southern Nevada Hospital's Financial Relief policy is available free of charge.

**Request a copy:**

- In person at any registration location
- By calling the Patient Accounting Customer Service 702-383-2347
- By mailing a request 1800 W Charleston Ave Las Vegas, NV 89102

Online at <https://umcsn.com/patients-visitors/patient-information/billing-insurance>

**DEFINITIONS** Elective Services are defined as scheduled services and certain non –emergent “walk-up” services (e.g., lab services) that are approved for a Cash Pay Rate under the guidelines set forth in this policy.

Emergent Services are defined as any service which is rendered to a patient: (1) presenting to the Emergency Department and determined to have a medical condition that without immediate medical attention would result in serious harm to the patient, whether or not the patient is admitted to the facility or



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treated and released, or (2) presenting as a direct admission with a medical condition that without immediate medical attention would result in serious harm to the patient.

Financial Relief Program is defined as the discount afforded to an individual determined to be Financially Indigent in accordance with the provisions of the policy.

Self-pay patient is defined as a patient who is solely responsible for the cost of his/her medical treatment.

Uninsured is defined as a patient without insurance coverage.

Extraordinary Collection Actions (ECAs) A list of collection activities, as defined by the IRS and Treasury, that healthcare organizations may only take against an individual to obtain payment for care after reasonable efforts have been made to determine whether the individual is eligible for Financial Relief. These include actions such as reporting adverse information to credit bureaus/reporting agencies along with legal/judicial actions.

Follow up and Collection Defines as account processing after billing has occurred, that is proactive, timely and efficient in moving an account toward resolution.

<b>Review Date:</b>	<b>By:</b>	<b>Description:</b>
7/2022	Patient Account Manager	New policy.