	Patient Financial Services Manual Billing and Registration	Policy Number	FIN033
		Effective Date	06/16/2014
JOHNS HOPKINS		Approval Date	N/A
JOHNS HOPKINS	<u>bject</u> Page	Page	1 of 4
HEALTH SYSTEM	Installment Payments	Supercedes	12/01/2011

This document applies to the following Participating Organizations:

All Children's Hospital Howard County General Hospital Johns Hopkins Bayview Medical Center Johns Hopkins Community Physicians

Johns Hopkins Home Care Group Sibley Memorial Hospital Suburban Hospital The Johns Hopkins Health System

Corporation

The Johns Hopkins Hospital

Keywords:

Table	Table of Contents	
I.	<u>PURPOSE</u>	1
II.	GENERAL CONDITIONS	1
III.	EXCEPTIONS	2
IV.	REFERENCE	2
V.	RESPONSIBILITIES – JHH, JHBMC, HCGH, SH, SMH, ACH	2
VI.	RESPONSIBILITIES – JHHCG	3
VII.	RESPONSIBILITIES – JHCP	3
VIII.	SPONSOR	4
IX.	REVIEW CYCLE	4
Apper	ndix A: Installment Matrix	Click Here

I. PURPOSE

The purpose of this policy is to provide an additional means for patients and/or guarantors ("patient/guarantors") to meet their financial obligations to a The Johns Hopkins Health System Corporation (JHHS) affiliate, while recognizing individual budgetary constraints. Patients who are unable to pay their expected liability in full or through use of available financing alternatives will be offered the opportunity to pay their account balance in monthly installments.

II. GENERAL CONDITIONS

For patients with multiple outstanding patient liabilities, the total balance and the available income of the debtor will be used to calculate the installment amount.

- 1. A matrix will be used to calculate the patient/guarantor's monthly payment amount (refer to Appendix A included with this policy).
- 2. The patient/guarantor must make a deposit equal to the amount of one installment payment at the time that the installment arrangement is finalized (100% for electives, 25% for emergency/urgent).
- Patients/guarantors failing to make payments as arranged will be subject to collection agency referral when they fall two

 (2) payments behind their agreed upon installment schedule. Agency referral may be deferred for patients who are re-hospitalized.
- 4. Patient Financial Services personnel use two different sets of procedures depending on the type of inpatient admission:A) Elective; B) Emergent/Urgent. Transplant admissions, because of their extreme costliness, normally are not appropriate candidates for installment payments.
- 5. Urgent or emergent admissions originating in the Emergency Department of a JHHS affiliate will not be denied or delayed for financial reasons. Due to the urgency of these admissions, determination regarding installments is normally not made until after the patient is admitted.

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A	Patient Financial Services Manual	Policy Number	FIN033
		Effective Date	06/16/2014
JOHNS HOPKINS		Approval Date	N/A
JOHNS HOPKINS	<u>Subject</u>	Page	2 of 4
HEALTH SYSTEM	Installment Payments	Supercedes	12/01/2011

III. EXCEPTIONS

- A. Any deviations from this standard schedule must be reviewed and approved by the Senior Director/Director (based on organization) of the Business Office or a designee before confirming with the patient/guarantor. The reason for the exception and approval for granting such exception must be clearly documented in the patient's financial record.
- B. Non U.S. residents are not eligible for this payment option.

IV. REFERENCE

JHHS Finance Policies and Procedures Manual

- Policy No. FIN034 JHHS Financial Assistance Program
- Policy No. FIN041 Estimating Inpatient Payment Requirements
- Policy No. FIN044 Inpatient Admission and Financial Responsibility
- Policy No. FIN055 Discharge Clearance

Johns Hopkins Community Physicians (JHCP) Finance Policy Manual

- Policy No. 0001 Point of Service Collection
- Policy No. 3300 Self-Pay Collections/Bad Debt Write-Off Criteria
- Policy No. 3400 Hill-Burton Application Policy
- Policy No. 3401 Hill-Burton Application Procedures

V. RESPONSIBILITIES – JHH, JHBMC, HCGH, SH, SMH, ACH

The Johns Hopkins Hospital (JHH), Johns Hopkins Bayview Medical Center (JHBMC), Howard County General Hospital (HCGH), Suburban Hospital (SH), Sibley Memorial Hospital (SMH), All Children's Hospital (ACH)

- A. Financial Counselor (Pre-Admission/Admission/In-House/Outpatient)
 - 1. Determine suitability of installment program for patient/guarantor.
 - 2. Compute estimated patient liability, required deposit and estimated monthly payment based on Appendix A.
 - 3. Notify patient and explain and discuss installment policy terms and potential payment plan terms with patient/guarantor.
 - 4. Obtain signed payment agreement, deposit, and scan payment agreement into patient's account folder.
 - a. If payment agreement not signed prior to admission, and there is sufficient time (7 calendar days) before admission, mail the installment agreement and promissory note to the patient/guarantor to sign and return with deposit amount.
 - b. If there is not sufficient time prior to admission to obtain signed payment agreement, advise Admitting Office that installment agreement and promissory note must be signed at admission.
 - 5. For those patients/guarantors who are unable or unwilling to complete an installment agreement and make the required deposit in advance of their admission, contact the patient's admitting physician to determine if the admission can be deferred until the patient/guarantor can make suitable financial arrangements.
 - a. If the Physician agrees with the deferral, the Patient Registrar or physician's practice staff (depending on affiliate) must notify the patient/guarantor of the postponement.
 - b. If the physician overrides the deferral recommendation, the Financial Counselor/Registrar should:
 - i. Contact the patient/guarantor to negotiate further terms and Note the override in the pre-registration comments
- B. Admitting Office/In-House Financial Counselor
 - 1. If payment agreement was not obtained prior to admission, seek to obtain signed payment agreement and deposit and scan payment agreement into patient's account folder.

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-	ohns Hopkins Health System	Policy Number	FIN033
	Patient Financial Services Manual Billing and Registration	Effective Date	06/16/2014
		Approval Date	N/A
- 11	Subject	Page	3 of 4
Installm	nstallment Payments	Supercedes	12/01/2011

- 2. If necessary, notify Nursing floor that patient needs to make payment on discharge.
- 3. Document all comments relevant to the installment agreement and the patient's financial status in the billing systems' comment file. Establish contract in the billing system specifying payment terms, document amount paid that day, and that the installment agreement was signed.
- C. Patient Financial Services Representative and/or Collection Staff and/or Extended Business Office (EBO)
 - 1. If installment arrangements were not finalized before discharge:
 - a. Determine the patient/guarantor's estimated monthly payment amount in accordance with the installment matrix (see Appendix A).
 - b. Notify patient/guarantor of the liability and discuss payment agreement and monthly payment amount. Answer any questions and ensure patient's understanding of the Installment Program.
 - c. Prepare and mail the promissory note with installment agreement to patient/guarantor for signature and return with deposit (if required).
 - d. Ensure return of the signed promissory note and installment agreement and required payment.
 - e. Code and document the patient's account in the billing system to reflect the monthly installment payment and terms. (At ACH, coding is NCO PP)
 - f. Monitor the patient's account to ensure compliance with the terms of the Installment Agreement.
 - g. Determine appropriateness of referring patient's account to collection agency if two (2) or more scheduled payments are missed. Agency referral may be deferred if patient has been re-hospitalized and if patient/guarantor notifies PFS and /or EBO on a timely basis.
 - h. Document all comments relevant to the agreement and patient's financial status not already noted in the billing system.
- D. Director of Patient Financial Services/Patient Accounts
 - 1. Review and approve any deviations from the standard installment schedule.
 - 2. Document relevant information in patient financial records.

VI. RESPONSIBILITIES – JHHCG

Johns Hopkins Home Care Group (JHHCG)

- A. Admission/Customer Service
 - 1. Compute estimated patient liability.
 - 2. Explain installment policy terms to patient/guarantor.
 - 3. Send and obtain signed installment agreement and deposit with first delivery.
 - 4. Document relevant notes in patient financial records.
- B. Customer Service Representative and/or Collection Staff
 - 1. If installment arrangements were not finalized before delivery:
 - a. Compute and notify patient/guarantor of patient liability, via phone.
 - b. Send and obtain promissory note and deposit, via next day delivery or mail.
 - c. Ensure return of signed agreement.
 - d. File agreement in patient's financial files.
 - e. Monitor account for compliance.
 - f. Determine if/when to send account to collection agency.
 - g. Document relevant notes in patient financial records.

VII. RESPONSIBILITIES – JHCP

- A. Collection Staff
 - 1. On initial contact:
 - a. Determine suitability of installment program for patient/guarantor.

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JOHNS HOPKINS	<u>Subject</u> Installment Payments	Page	4 of 4
HEALTH SYSTEM		Supercedes	12/01/2011

- b. Determines available income of debtor. Compute estimated patient liability. Determine the patient/guarantor's estimated monthly payment amount in accordance with the installment matrix shown in Appendix A.
- c. Notify patient/guarantor of the liability and amount of the estimated monthly payments and ensure understanding of the Installment Program.
- d. Obtain installment deposit, promissory note and installment agreement. Code the patient's account in the automated billing systems to reflect the monthly installment payment and terms.
- e. Document relevant notes in patient financial records.
- 2. During monthly collection follow-up activity:
 - a. Monitor account for compliance.
 - b. Determine appropriateness of referring patient's account to collection agency if two (2) or more scheduled payments are missed
 - c. Document relevant information in patient financial records.
 - d. Review and approve any deviations from the standard installment schedule.
 - e. Document relevant information in patient financial records.
- B. Director, Business Office or designee
 - 1. Review and approve any deviations from the standard installment schedule before Financial Counselor notifies patient/guarantor.
 - 2. Document clearly in writing and in automated billing system's comments file the reason(s) for the deviation from the standard. Deviation from the standard installment schedule may be permitted if the patient's financial circumstances warrant an extension of the installment period.

VIII. SPONSOR

- Senior Director, Finance (JHCP)
- Senior Director, Patient Finance (JHH, JHHS, JHBMC, HCGH)
- Director, Patient Financial Services (SH)
- CFO, (JHHCG)
- Director, Patient Financial Services (SMH)
- Director, Patient Accounts (ACH)

IX. REVIEW CYCLE

Three (3) years

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