



PATIENT FINANCIAL OBLIGATION

Title:	Patient Financial Obligation
Applies to:	Memorial Health System
Department:	Finance
Date Reviewed:	
Reviewer:	
Date Revised:	6/1/2021
Reviser:	Melissa Athey, Revenue Cycle Supervisor Patient Access
Document Type:	Policy

- I. Policy Statement:** Patients are expected to meet their financial obligation associated with the care provided by Memorial Health System (Marietta Memorial Hospital (MMH), Selby General Hospital (SGH), Marietta HealthCare Physicians, Inc. (MHCPI) Sistersville General Hospital (SIS) and Sistersville Rural Health Centers (RHC), for elective, non-emergent medically necessary services, patients must have satisfied past financial obligations and/or have established a payment plan to satisfy financial obligations. If a patient has an outstanding financial obligation, payment and/or payment plan must be established prior to any new scheduled elective non-emergent services being provided. If a patient refuses to satisfy past financial obligations, the schedule elective nonemergent services may not be provided.
- a. Self-pay Patients (Uninsured/No Insurance):** Self-pay discounts are available to all uninsured patients who do not qualify for any other financial assistance and pay their balances in full or sign an acceptance payment plan. If payment obligations are not met, elective procedures may be rescheduled.
- i. Hospital and Clinical Services – 40% discount ii. Prompt Pay Discounts for Self -pay Patients (Uninsured/No Insurance):
 1. Forty (40) % uninsured discount + an additional fifteen (15) % discount to pay their estimated charges in full during the pre-registration process or at time of service for facility services. ***Copay is excluded from discount***
 2. **Prompt Pay Discounts for patients with Insurance Coverage:** Prompt Pay discounts are available for patients treated at Memorial Health System who have insurance coverage. ***Copay is excluded from discount***
 - iii. Fifteen (15) % discount if paid in full during the pre-registration processes or at time of service for facility services. ***Copay is excluded from discount***
 - iv. No post service discounts are offered except:
 1. Patients that receive a balance bill statement that received a pre-registration or time of service discount, related balances qualify for the same fifteen (15) % discount. ***Copay is excluded from discount***
- b. Excluded Services:** Self-pay and Prompt Pay discounts are only applicable for medically necessary services. The following services are excluded from receiving self-pay, prompt pay and tax season discounts: Infertility, Cosmetic, Bariatric Services, Hearing Aids, Glasses, MemorialCareNow telehealth and other non-medically (elective) services and DME items.

Payment arrangements are required to be established prior to these services. If previous payment obligations are not honored, elective procedures may be rescheduled until such obligations are met.

c. Upon request or referral for non-emergent elective services, patient's financial information will be reviewed including insurance coverage, out of pocket estimates and past financial obligations to the system.

- i. If a patient has an outstanding balance, a Patient Financial Advocate (PFA) will contact the patient and secure payment and/or assist the patient with establishing a payment plan. If the patient refuses to settle an outstanding balance, elective non-emergent services may not be provided until such obligations are met.
- ii. If a patient has met all previous financial obligations, an estimate of current out of pocket financial obligations for services will be reviewed with the patient. The patient must provide a deposit and/or establish a payment plan for such obligations prior to providing service. If the patient refuses to meet the financial obligations, services may not be provided.
- iii. Memorial Health System provides certain discounts for insured, underinsured, and patients without insurance coverage. (See attached Discounts).
- iv. Memorial Health System patients may set up payment plans for financial obligations. Payment guidelines based on outstanding balance and financial circumstances. (See attached Payment Plan Guidelines).
- v. Outstanding patient balances may be sent to a collection agency if other payment arrangements aren't made. The patient will receive a final statement giving them a 30-day notice before being placed with a collection agency.

d. Patient Plan Guidelines: (Not applicable for Excluded Services) Memorial Health System provides an interest-free payment plan for patients who need to make monthly payments to satisfy their financial responsibility. First payment is required before terms of contract will be established.

Listed below are the payment plan guidelines by guarantor balance:

- i. Balances less than \$200, no contract
- ii. Balances between \$200 - \$499 maximum 4 months
- iii. Balances between \$500 - \$1,500 maximum 9 months
- iv. Balances between \$1,501 - \$2,500 maximum 15 months
- v. Balances between \$2,501 - \$5,000 maximum 21 months
- vi. Balances between \$5,001-\$10,000 maximum 33 months
- vii. Balances greater than \$10,000 maximum 36 months

e. Access to Policies and Financial Assistance Application: The application and policies are available at:

- i. MHS 401 Matthew Street, Marietta Ohio 45750
- ii. SGH 1106 Colegate Drive, Marietta Ohio 45750
- iii. MHS 802 Wayne St, Marietta Ohio 45750
- iv. MHS 807 Farson St, Belpre Ohio 45714
- v. Financial Counselor (740) 568-5263
- vi. Public Website: www.mhssystem.org
- vii. Email request to: financialassistance@mhssystem.org

II. References: Non-applicable.

Approved By: Chief Financial Officer

Endorsements:	Finance Committee	
<u>Regulating or Accrediting Organization:</u>	<u>Standard</u>	
Healthcare Facilities Accreditation Program (HFAP)	# :	
Ohio Department of Health (ODH)	# :	
Centers for Medicare and Medicare Services (CMS)	# :	
Other:	# :	