

斯坦福医院

主旨： 计费和收款政策和程序

政策编号	0004	已执行：	
参考：	免费床位基金政策； 经济援助计划政策	修订：	10/25/12, 11/08/13, 11/12/13, 10/06/14, 10/05/15, 10/11/16
批准：	EM	已审查：	10/25/19
部门：	患者业务服务	页码：	第 1 页，共 2 页

根据《平价医疗法案》和《公平债务催收实践法案》的授权，根据 IRS 和财政部 501(r) 最终规则进行了修订。

目的

本政策建立了有关患者账户收款的合理程序，包括斯坦福医院（“医院”）或签约的外部收款机构和律师事务所可能采取的特殊收款行动（“ECA”）。

政策

医院的政策是向有能力支付服务费用的患者收取未偿余额。无论保险状况如何，收款程序都将一致且公平地适用于所有患者。本政策将以医院的经济援助政策（“FAP”）翻译成的所有语言发布。所有收集程序都将遵守适用的法律。FAP、经济援助简明语言摘要（下称“摘要”）和经济援助申请表（下称“申请”）可从以下斯坦福健康网站获得：<http://www.stanfordhealth.org/fap>。FAP 也附在本政策中。

可能有资格获得经济援助的患者之识别和通知

医院将尽合理努力识别可能有资格获得经济援助的患者。医院的患者业务服务部会通知所有自费患者提交申请的机会，以便他们可以寻求部分或全部减免急诊和/或医疗必要服务（据此和据 FAP 称为“合格服务”）的医院账单。此通知是通过包含在发送给自费患者的所有报表中以及报表本身上的插页发出；该通知还将患者引导至医院网站，其将他/她引导至政策、摘要和申请。

确定经济援助的资格

应根据 FAP 来确定患者是否有资格获得经济援助。

计费和收款流程

- 医院提供服务后的第一份账单。对于保险后的余额，医院会在初始报表后 30 天提供第二份报表。
- 所有声明都包含有关 FAP 可用性的信息，包括联系信息，如上所述。
- 在报表周期的最后阶段，医院将尽合理努力口头通知患者有关 FAP 和申请援助的可用性，并将以书面形式通知患者以下内容：
 - 医院或其授权指定人员可能采取的特殊催收行动 (“ECA”) 来获取护理的付款。
 - 可以启动此类 ECA 的日期，不得早于书面通知日期后 30 天：以及摘要。
- 如果患者已向医院付款，并且医院随后确定该患者符合 FAP 资格，则医院将通知该患者该确定并退还超出患者根据 FAP 规定承担的责任的金额，除非该超额金额低于 5.00 美元。
- 患者账户由主管和/或患者业务服务经理审查和批准，以便直接转介绍给收款律师。对于收款账户，以下款项将在收款 1 年后注销为坏账：
 - 机构认定为无法收回的账目；
 - 机构无法联系到患者的账户；以及
 - 机构认为患者是判决证据的账户。
- 医院将在适当的情况下参与以下的 ECA：
 - 在我们确定需要进行法律诉讼且常规收款机构时间框架或程序无效的情况下，账户将直接转交给律师；在这种情况下，医院可能会采取法律行动向患者收取账单（但这不包括在未决破产程序中提出索赔，该程序不被视为 ECA）；
 - 向信用报告机构或信用局报告；

- 对个人财产设置留置权（州法律根据与所提供的护理相关的人身伤害的判决或和解而允许的留置权除外）；
- 扣押或夺取任何个人银行账户或其他个人财产；和/或
- 扣押工资。

尽管有任何相反的规定：

- 在患者收到初始医院服务账单后的至少 120 天内，医院不会进行任何 ECA；
- 在医院的患者业务服务部门已确定医院已做出足够努力来确定患者是否有资格获得经济援助之前，医院不得参与任何 ECA；以及
- 如果个人提交经济援助申请，医院应暂停针对个人的任何 ECA；以及
- 医院不会参与以下的 ECA：
 - 不动产止赎；
 - 导致个人受到扣押身体的令状或以其他方式导致个人被捕；
 - 除非满足某些条件，否则将个人债务出售给另一方；或
 - 由于未支付先前的账单而推迟或拒绝医疗上必要的护理或要求在提供护理之前付款。

The Stamford Hospital

Subject: **Billing and Collections Policy and Procedures**

Policy # 0004 **Implemented:**
Reference(s): Free Bed Funds Policy; **Revisions:** 10/25/12, 11/08/13,
11/12/13, 10/06/14,10/05/15,
Financial Assistance Program Policy 10/11/16
Approval: EM **Reviewed** 10/25/19
Department: Patient Business Services **Page:** 1 of 2

Revised in accordance with the IRS and Treasury 501(r) final rule under the authority of the Affordable Care Act and the Fair Debt Collection Practices Act.

Purpose

This policy establishes reasonable procedures regarding collection of patient accounts, including Extraordinary Collection Actions (“ECAs”), that may be taken by The Stamford Hospital (“Hospital”) or contracted external collection agencies and law firms.

Policy

It is the policy of the Hospital to pursue collection of outstanding balances from patients who have the ability to pay for services. Collection procedures will be applied consistently and fairly for all patients regardless of insurance status. This Policy will be issued in all languages into which the Hospital’s Financial Assistance Policy (“FAP”) is translated. All collection procedures will comply with applicable laws. The FAP, the Financial Assistance Plain Language Summary (the “**Summary**”) and the Financial Assistance Application (“**Application**”) are available on the Stamford Health website here: <http://www.stamfordhealth.org/fap>. The FAP is also attached to this Policy.

Identification and Notification of Patients Who May be Eligible for Financial Assistance

The Hospital will make reasonable efforts to identify patients who may be eligible for financial assistance. The Hospital’s Patient Business Services Department notifies all self-pay patients of their opportunity to submit an Application, so that they may seek a partial or complete reduction of their Hospital bill for emergency and/or medically necessary services (referred to as “**Eligible Services**” herein and under the FAP). This notification is made through inserts included with all statements sent to self-pay patients, and on the statements themselves; the

notification also directs the patient to the Hospital website, which leads him/her to the policy, Summary, and Application.

Determination of Eligibility for Financial Assistance

The determination as to whether a patient is eligible for financial assistance shall be made pursuant to the FAP.

Billing and Collection Process

- The Hospital provides the first billing statement following services. For balances after insurance, the Hospital provides a second statement 30 days after the initial statement.
- All statements contain information regarding the availability of the FAP including contact information, as described above.
- During the final phase of the statement cycle, the Hospital will make reasonable efforts to orally notify patients about the FAP and the availability of assistance with the Application and will notify patients in writing of the following:
 - The Extraordinary Collection Actions (“ECAs”) the Hospital or its authorized designee may take to obtain payment for care.
 - A date after which such ECA(s) may be initiated that is no earlier than 30 days after the date of the written notice: and The Summary.
- If a patient has made payment(s) to the Hospital, and the Hospital subsequently determines that the patient is FAP-eligible, Hospital will notify the patient of such determination and provide a refund of the amount paid in excess of the patient’s responsibility under the FAP, unless such excess amount is less than \$5.00.
- Patient accounts are reviewed and approved by the Director and or Manager of Patient Business Services for direct referral to collection attorneys. For accounts in collection, the following will be written off as bad debt after 1 year of collection:
 - Accounts that the agency has identified as uncollectible;
 - Accounts where the agency has been unable to contact the patient; and

- Accounts where the agency deems the patient to be judgment proof.
- The Hospital will, when appropriate, engage in the following ECAs:
 - Accounts are directly referred to attorneys in cases where we have identified circumstances where legal proceedings will be eminent and the routine collection agency time frames or procedures would not be effective; in such cases, the Hospital may commence legal action to collect a bill from a patient (but this does not include filing of a claim in a pending bankruptcy proceeding, which is not considered an ECA);
 - Reporting to a credit reporting agency or credit bureau;
 - Placing a lien on the individual's property (except liens permitted under state law upon judgments or settlements for personal injury related to the care provided);
 - Attaching or seizing any individual bank account or other personal property; and/or
 - Garnishing wages.

Notwithstanding anything herein to the contrary:

- The Hospital will not engage in any ECAs for at least 120 days after a patient receives the initial bill for Hospital services;
- The Hospital shall not engage in any ECAs until the Hospital's Patient Business Services Department has determined that the Hospital has made adequate efforts to determine whether the patient is eligible for financial assistance; and
- The Hospital shall suspend any ECA against an individual if he/she submits an application for financial assistance; and
- The Hospital will not engage in the following ECAs:

- Foreclosing on real property;
- Causing and individual to be subject to a writ of body attachment or otherwise causing an individual's arrest;
- Selling an individual's debt to another party unless certain conditions are met; or
- Deferring or denying medically necessary care or requiring payment before providing care because of non-payment of a prior bill.