BON SECOURS MERCY HEALTH

Policy Name: Billing & Collections Policy

Policy Number: 503
Department: Finance
Functional Area: Finance

Approved by: Bon Secours Mercy Health, Inc. Board of Directors

Effective Date: 3/1/2023 Version: 4.0 Policy Status: Approved

I. Policy (High Concept)

As established by IRS Code Section 501(r), BSMH is committed to providing education to patients and guarantors as it relates to billing and collections of payment for services rendered. BSMH will not engage in any extraordinary collection actions (as defined herein) against an individual to obtain payment for care before reasonable efforts have been made to determine whether the individual is eligible for assistance for the care under the HFA Policy.

II. Purpose (Three Key Messages)

In the light of its mission to improve the health of its communities, with special emphasis on the poor and underserved, and in the spirit of the healing ministry of Jesus, Bon Secours Mercy Health is committed to providing education to patients and guarantors as it relates to billing and collections of payment for services rendered. Payment on accounts will be pursued consistently, regardless of race, age, gender, ethnic background, national origin, citizenship, primary language, religion, education, employment or student status, disposition, relationship, insurance coverage, community standing, or any other discriminatory differentiating factor. To that end, BSMH will not engage in any extraordinary collection actions (as defined herein) against an individual to obtain payment for care before reasonable efforts have been made to determine whether the individual is eligible for assistance for the care under the HFA Policy.

Every guarantor will be given reasonable time and communication to be aware of and understand their financial responsibility. The guarantor will be held financially responsible for services actually provided and adequately documented. BSMH representatives and/or its designee will widely publicize the HFA Policy by, among other things, offering a copy of the plain language summary of the policy prior to the patient being discharged. Understanding each guarantor's insurance coverage is the responsibility of the guarantor. Any self-pay liability secondary to insurance coverage is defined by the guarantor's insurance coverage and benefit design. BSMH relies on the explanation of benefits and other information from the guarantor and the insurance carrier for eligibility, adjudication of the claim, and patient responsibility determinations.

III. Scope (Populations to which the policy applies)

This Billing and Collections policy applies to the following BSMH Healthcare Facilities. The Billing and Collections Policy applies to BSMH Healthcare Facilities in the United States of America ("USA") and does not include any hospitals located outside of the USA:

Cincinnati

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- Mercy Health Anderson Hospital
- Mercy Health Clermont Hospital
- Mercy Health Fairfield Hospital
- The Jewish Hospital Mercy Health
- Mercy Health West Hospital
- Mercy Health Kings Mills Hospital*

*Mercy Health - Kings Mills Hospital is expected to open during 2023

Kentucky

- Mercy Health Lourdes Hospital
- Mercy Health Marcum and Wallace Hospital

Lima

Mercy Health - St. Rita's Medical Center

Lorain

- Mercy Health Lorain Hospital
- Mercy Health Allen Hospital

Springfield

- Mercy Health Springfield Regional Medical Center
- Mercy Health Urbana Hospital

Toledo

- Mercy Health St. Vincent Medical Center
- Mercy Health Perrysburg Hospital
- Mercy Health St. Charles Hospital
- Mercy Health St. Anne Hospital
- Mercy Health Defiance Hospital
- Mercy Health Tiffin Hospital
- Mercy Health Willard Hospital

Youngstown

- Mercy Health St. Elizabeth Youngstown Hospital
- Mercy Health St. Elizabeth Boardman Hospital
- Mercy Health St. Joseph Warren Hospital

Richmond

- Bon Secours St. Francis Medical Center
- Bon Secours Richmond Community Hospital
- Bon Secours Memorial Regional Medical Center

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• Bon Secours - St. Mary's Hospital

Rappahannock

Rappahannock General Hospital

Hampton Roads

- Bon Secours Mary Immaculate Hospital
- Bon Secours Maryview Medical Center
- Bon Secours Health Center at Harbour View

South Carolina

- St. Francis Downtown
- St. Francis Eastside
- St. Francis Millennium

Southern Virginia

- Bon Secours Southern Virginia Medical Center
- Bon Secours Southside Medical Center
- Bon Secours Southampton Medical Center

IV. Policy Details (Supporting Points)

Policy:

A statement of hospital services is sent to the patient/guarantor in incremental billing cycles. In cases when the patient has no insurance coverage, that is a self-pay patient, the statement is sent after services are rendered. In most cases when patients have coverage through an insurance carrier, the statements are sent after the services have been rendered, claim is submitted, and claim has been adjudicated by the insurance carrier. There are some cases, for example, when there is a stop in the adjudication of a claim due to the patient needing to provide additional information, where a statement will be sent to the patient and/or guarantor prior to claim processing.

BSMH representatives and/or their designees may attempt to contact the patient/guarantor (via telephone, mail, or email) during the statement billing cycle in order to pursue collections. Collection efforts are documented on the patient's account.

Statement Cycle:

The statement cycle will be measured from the first statement sent to the patient (date sent) and include the following:

- Subsequent statements sent to the patient/guarantor in 30 day increments to derive at the statement process:
 - 1st Date of first billing
 - 2nd 30 Days post
 - o 3rd 60 Days post
 - o 4th 90 Days post and notice of submission to Collection Agency if amounts

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- left unpaid or the HFA application not received
- 5th 120 Days post Submission to Collection Agency (letter sent from Collections), subject to the provisions of this policy.
- A secondary or tertiary Collection Agency may be used, subject to the provisions of this policy.

Extraordinary Collection Actions (ECAs):

- It is the policy of BSMH not to engage in ECAs against an individual to obtain payment for care before making reasonable efforts to determine whether the individual is eligible for assistance under the HFA Policy.
- ECAs include reporting adverse information about the individual to consumer credit reporting agencies or credit bureaus.
- BSMH may pursue the ECAs outlined above in the collection of delinquent accounts. BSMH will not approve of any legal action being taken in the collection of delinquent accounts by any vendors working on behalf of BSMH. BSMH will not defer or deny, or require a payment before providing, medically necessary care because of an individual's nonpayment of one or more bills for previously provided care covered under the HFA Policy.

Efforts to Determine HFA Eligibility:

- BSMH will allow patients to submit complete HFA applications during a 240-day Application Period (as defined herein).
- BSMH will not engage in ECAs against the patient or guarantor without making reasonable efforts to determine the patient's eligibility under the HFA Policy. Specifically:
 - BSMH will notify individuals about the HFA Policy as described herein before initiating any ECAs to obtain payment for the care and refrain from initiating such ECAs for at least 120 days from the first post-discharge billing statement for the care
 - If BSMH intends to pursue ECAs, the following will occur at least 30 days before first initiating one or more ECAs:
 - BSMH will notify the patient in writing that financial assistance is available
 for eligible individuals, identifies the ECAs the facility (or other authorized
 party) intends to initiate to obtain payment for the care, and states a
 deadline after which such ECAs may be initiated that is no earlier than
 30 days after the date that the written notice is provided;
 - The above notice will include a plain language summary of the HFA Policy;
 - BSMH will make a reasonable effort to orally notify the patient about the HFA Policy and how the individual may obtain assistance with the application process.
 - o If BSMH aggregates an individual's outstanding bills for multiple episodes of care before initiating one or more ECAs to obtain payment for those bills, it will refrain from initiating the ECAs until 120 days after it provided the first postdischarge billing statement for the most recent episode of care included in the aggregation.

Processing HFA Applications:

If an individual submits an incomplete HFA application during the Application Period.

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BSMH, will:

- Suspend any ECAs to obtain payment for the care; and
- Provide the individual with a written notice that describes the additional information and/or documentation required under the HFA Policy or HFA application form that must be submitted to complete the application and that includes the BSMH contact information set forth at the end of this policy.
- If an individual submits a complete HFA application during the Application Period, BSMH will:
 - Suspend any ECAs to obtain payment for the care;
 - Make an eligibility determination as to whether the individual is HFA-eligible for the care and notify the individual in writing of the eligibility determination (including, if applicable, the assistance for which the individual is eligible) and the basis for this determination.
 - o If the individual is determined to be HFA-eligible for the care, BSMH will:
 - If the individual is determined to be eligible for assistance other than free care, provide the individual with the following:
 - A billing statement that indicates the amount the individual owes for the care as an HFA-eligible individual
 - How that amount was determined and
 - State, or describe how the individual can get information regarding, the AGB for the care; or
 - State, or describe how the individual can apply for more generous assistance under the HFA.
 - Refund to the individual any amount he or she paid for the care (whether to BSMH or any other party to whom BSMH has referred to sold the individual's debt for the care) that exceeds the amount he or she is determined to be personally responsible for paying as an HFA-eligible individual, unless such excess amount is less than \$5 (or such other amount published in the Internal Revenue Bulletin).
 - Take all reasonably available measures to reverse any ECA (with the exception of a sale of debt) taken against the individual to obtain payment for the care.
- When no HFA application is submitted, unless and until BSMH receives a HFA
 application during the Application Period, BSMH, as applicable, may initiate ECAs to
 obtain payment for the care once it has notified the individual about the HFA as
 described herein.

Miscellaneous Provisions:

- Anti-Abuse Rule BSMH will not base its determination that an individual is not HFAeligible on information that BSMH has reason to believe is unreliable or incorrect or on information obtained from the individual under duress or through the use of coercive practices.
- **Determining Medicaid Eligibility** BSMH will not fail to have made reasonable efforts to determine whether an individual is HFA-eligible for care if, upon receiving a complete HFA application from an individual who BSMH believes may qualify for Medicaid, BSMH postpones determining whether the individual is HFA-eligible for the care until after the individual's Medicaid application has been completed and submitted and a determined as to the individual's Medicaid eligibility has been made.

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- **No Waiver of HFA Application –** Obtaining a signed waiver from an individual, such as a signed statement that the individual does not wish to apply for assistance under the HFA Policy or receive the notifications described herein, will not itself constitute a determination that the individual is not HFA-eligible.
- Final Authority for Determining HFA Eligibility Final authority for determining that BSMH has made reasonable efforts to determine whether an individual is HFA-eligible and may therefore engage in ECAs against the individual rests with the BSMH Patient Financial Services Department.
- Agreements with Other Parties If BSMH sells or refers an individual's debt related to care to another party, BSMH will enter into a legally binding written agreement with the party that is reasonably designed to ensure that no ECAs are taken to obtain payment for the care until reasonable efforts have been made to determine whether the individual is HFA-eligible for the care.
- **Providing Documents Electronically** BSMH may provide any written notice or communication described in this policy electronically (for example, by email) to any individual who indicates he or she prefers to receive the written notice or communication electronically.

V. Definitions

- AGB Amounts generally billed for emergency or other medically necessary care to individuals who have insurance coverage.
- Application Period The period during which BSMH must accept and process an application
 for financial assistance under the HFA submitted by an individual in order to have made
 reasonable efforts to determine whether the individual is eligible for financial assistance under
 the policy. The Application Period begins on the date the care is provided and ends on the
 latter of the 240th day after the date that the first post-discharge billing statement for the care
 is provided or at least 30 days after BSMH provides the individual with a written notice that
 sets a deadline after which ECAs may be initiated.
- **BSMH** Bon Secours Mercy Health
- **BSMH Healthcare Facilities –** Bon Secours Mercy Health hospitals
- **ECAs** –Extraordinary Collection Actions taken by BSMH against an individual related to obtaining payment of a bill for care covered under the HFA
- HFA Healthcare Financial Assistance
- **HFA Policy** BSMH Healthcare Financial Assistance Policy.

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• **HFA-Eligible Individual** – An individual eligible for financial assistance under the HFA Policy (without regard to whether the individual has applied for assistance under the HFA Policy).

VI. Attachments

Attachment 1 - BSMH Contact Information Section

VII. Related Policies

BSMH offer other options for uninsured or underinsured patients who do not qualify for financial assistance under the HFA Policy. For further information, please see the following BSMH policies:

- BSMH Healthcare Financial Assistance Policy
- BSMH Uninsured / Self-Pay Discount Policy

BSMH maintains separate Healthcare Financial Assistance and Billing and Collections Policies for the BSMH Medical Group practice locations and Urgent Care facilities. For further information, please see the following policies:

- BSMH Medical Group Healthcare Financial Assistance Policy
- BSMH Medical Group Billing and Collections Policy
- BSMH Urgent Care Healthcare Financial Assistance Policy
- BSMH Urgent Care Billing and Collections Policy

VIII. Version Control

Version	Date	Description	Prepared By
1.0	11/25/2019	Billing & Collections Policy	Finance/Travis Crum
2.0	2/18/2021	Billing & Collections Policy	Finance/Travis Crum
3.0	2/17/2022	Billing & Collections Policy	Finance/Travis Crum
4.0	1/24/2023	Billing & Collections Policy	Finance/Travis Crum

Attachment 1

Contact Information:

For more information, please contact BSMH as follows for **Mercy Health hospitals**:

Website	www.bsmhealth.org/financial-assistance www.mercy.com/financial-assistance	
	www.merey.com/maneial-assistance	
Telephone	1-877-918-5400	
By Mail	11511 Reed Hartmann Highway	
	Blue Ash, Ohio 45241	
	Attention: Public Benefits	
In Person	Mercy Health - Anderson Hospital	Mercy Health - St. Anne Hospital
	7500 State Road	3404 W. Sylvania Avenue
	Cincinnati, OH 45255	Toledo, OH 43623
	Dept: Financial Counseling	Dept: Financial Counseling
	Mercy Health – Clermont Hospital	Mercy Health - Defiance Hospital
	3000 Hospital Drive	1404 E. Second Street
	Batavia, Ohio 45103	Defiance, OH 43512
	Dept: Financial Counseling	Dept: Financial Counseling
	Mercy Health – Fairfield Hospital	Mercy Health - Tiffin Hospital
	3000 Mack Road	45 St. Lawrence Drive
	Fairfield, Ohio 45014	Tiffin, OH 44883
	Dept: Financial Counseling	Dept: Financial Counseling
	The Jewish Hospital – Mercy Health 4777 E. Galbraith Road	Mercy Health - Willard Hospital 1100 Neal Zick Rd.
	Cincinnati, Ohio 45236	Willard, OH 44890
	Dept: Financial Counseling	Dept: Financial Counseling
	Mercy Health – West Hospital	Mercy Health – Perrysburg Hospital
	3300 Mercy Health Blvd.,	12623 Eckel Junction Rd.
	Cincinnati, Ohio 45211	Perrysburg, OH 43551
	Dept: Financial Counseling	Dept: Financial Counseling
	Mercy Health – Kings Mills Hospital	Mercy Health - St. Elizabeth
	5440 Kings Island Drive	Youngstown Hospital
	Mason, Ohio 45040	1044 Belmont Ave.
	Dept: Financial Counseling Mercy Health -	Youngstown, OH 44501
	Springfield Regional Medical Center	Dept: Financial Counseling
	100 Medical Center Drive (at West North St)	Mercy Health - St. Elizabeth Boardman
	Springfield, Ohio, 45504	Hospital
	Dept: Financial Counseling	8401 Market St.
	Mercy Health – Urbana Hospital	Boardman, OH 44512
	904 Scioto St,	Dept: Financial Counseling
	Urbana, OH 43078	Mercy Health - St. Joseph Warren
	Dept: Financial Counseling	Hospital
	Mercy Health - St. Rita's Medical Center	667 Eastland Avenue
	730 W. Market St. Lima, OH 45801	Warren, Ohio 44484
	Dept: Financial Counseling	Dept: Financial Counseling
	Mercy Health - Lourdes Hospital	
	1530 Lone Oak Rd	Mercy Health – Lorain Hospital
	Paducah, KY 42003	3700 Kolbe Rd.
	Dept: Financial Counseling	Lorain, OH 44053
	Mercy Health - Marcum and Wallace	Dept: Financial Counseling
	Hospital	Mercy Health - Allen Hospital

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60 Mercy Court Irvine, KY 40336	200 W. Lorain St.
Dept: Financial Counseling	Oberlin, Ohio 44074
Mercy Health - St. Vincent Medical Center	Dept: Financial Counseling
2213 Cherry Street	
Toledo, OH 43608	
Dept.: Financial Counseling	
Mercy Health - St. Charles Hospital	
2600 Navarre Avenue	
Oregon, OH 43616	
Dept.: Financial Counseling	
, ,	

Information:

For more information, please contact BSMH as follows for **Bon Secours hospitals**:

Website	www.bsmhealth.org/financial-assistance	
	www.fa.bonsecours.com	
Telephone	804-342-1500 (Local Richmond)	
,	877-342-1500	
By Mail	Bon Secours Mercy Health Financial Aid	
	P.O. Box 631360	
	Cincinnati, OH 45263-1360	
In Person	Bon Secours St. Francis Medical Center	Bon Secours Mary Immaculate Hospital
	13710 St. Francis Boulevard	2 Bernadine Dr
	Midlothian, VA 23114	Newport News, VA 23602
	Dept: Financial Counseling	Dept: Financial Counseling
	Bon Secours – Richmond Community	Bon Secours Maryview Medical Center
	Hospital	3636 High Street
	1500 N. 28th Street	Portsmouth, VA 23707
	Richmond, VA 23223	Dept: Financial Counseling
	Dept: Financial Counseling	Bon Secours Health Center at Harbour
	Bon Secours Memorial Regional Medical	View
	Center	5818 Harbour View Boulevard
	8260 Atlee Road	Suffolk, VA 23435
	Mechanicsville, VA 23116	Dept: Financial Counseling
	Dept: Financial Counseling	St. Francis Downtown
	Bon Secours St. Mary's Hospital	One St. Francis Drive
	5801 Bremo Road	Greenville, SC 29601
	Richmond, VA 23226	Dept: Financial Counseling
	Dept: Financial Counseling	St. Francis Eastside
	Rappahannock General Hospital	125 Commonwealth Drive
	101 Harris Road	Greenville, SC 29615
	Kilmarnock, VA 22482	Dept: Financial Counseling
	Dept: Financial Counseling	St. Francis Millennium
		2 Innovation Drive
		Greenville, SC 29607
		Dept: Financial Counseling

Information:

For more information, please contact BSMH as follows for **Southern Virginia hospitals**:

Website	www.bsmhealth.org/financial-assistance
	www.fa.bonsecours.com

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Telephone	804-342-1500 (Local Richmond)
-	877-342-1500
By Mail	Bon Secours Mercy Health Financial Aid
	P.O. Box 631360
	Cincinnati, OH 45263-1360
In Person	Bon Secours Mercy Health Petersburg LLC
	(Formerly known as Southside Regional Medical Center)
	200 Medical Park Blvd
	Petersburg, VA 23805
	Bon Secours Mercy Health Emporia LLC
	(Formerly known as Southern Virginia Regional Medical Center)
	727 N Main Street
	Emporia, VA 23847
	Bon Secours Mercy Health Franklin LLC
	(Formerly known as Southampton Memorial Hospital)
	100 Fairview Drive
	Franklin, VA 23851

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