

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:	3/1/2025
Version:	6.0
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

Policy Name:	Billings & Collections	Last Reviewed Date:	1/24/2025	Page:	1
Version:	6.0	Last Modified Date:	1/24/2025	Original Date:	12/2/2019

- 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

**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
- 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\*
- Bon Secours Harbour View Medical Center\*

\*Bon Secours Harbour View Medical Center is expected to open during 2025. Bon Secours Health Center at Harbour View will become part of the new Bon Secours Harbour View Medical Center at that time.

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:

Policy Name:	Billings & Collections	Last Reviewed Date:	1/24/2025	Page:	3
Version:	6.0	Last Modified Date:	1/24/2025	Original Date:	12/2/2019

- 1st – Date of first billing
- 2nd – 30 Days post
- 3rd – 60 Days post
- 4th – 90 Days post and notice of submission to Collection Agency if amounts 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):**

- As defined in the definitions section of this document, ECAs include legal or Judicial actions including, but not limited to placing a lien on an individual, foreclosing on an individual’s real property, attachment or seizure of an individual’s bank accounts or personal property, engaging in a civil action against an individual, causing an arrest or a writ of body attachment, and garnishing an individual’s wages or other income.
- BSMH will not perform any of these legal actions or approve of the use of legal actions by any vendors working on behalf of BSMH. BSMH will periodically perform credit bureau reporting in certain circumstances.
- BSMH will not engage in any ECAs against an individual to obtain payment before making reasonable efforts to determine whether the individual is eligible for assistance under the HFA Policy.
- 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.
- If BSMH aggregates an individual’s outstanding bills for multiple episodes of

Policy Name:	Billings & Collections	Last Reviewed Date:	1/24/2025	Page:	4
Version:	6.0	Last Modified Date:	1/24/2025	Original Date:	12/2/2019

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 post-discharge 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, 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.
  - 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 HFA-eligible 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.

Policy Name:	Billings & Collections	Last Reviewed Date:	1/24/2025	Page:	5
Version:	6.0	Last Modified Date:	1/24/2025	Original Date:	12/2/2019

- **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 determination as to the individual’s Medicaid eligibility has been made.
- **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** – ECAs are actions taken by a hospital facility against an individual related to obtaining payment of a bill for care covered under the hospital facility’s Financial Assistance Policy that involve reporting adverse information about an individual to consumer credit reporting agencies or credit bureaus, requiring payment before providing medical necessary care or denying care due to non-payment, or actions that require a legal or judicial process. Legal or Judicial actions include, but are not limited to placing a lien on an individual, foreclosing on an individual’s real property, attachment or seizure of an individual’s bank accounts or personal property, engaging in a civil action against an individual, causing an arrest or a writ of body attachment, and garnishing an individual’s wages or other income.
- **HFA** - Healthcare Financial Assistance
- **HFA Policy**– BSMH Healthcare Financial Assistance Policy.
- **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**

<b>Version</b>	<b>Date</b>	<b>Description</b>	<b>Prepared By</b>
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
5.0	1/22/2024	Billing & Collections Policy	Finance/Travis Crum
6.0	1/24/2025	Billing & Collections Policy	Finance/Travis Crum



**Contact Information:**

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

<i>Website</i>	<a href="http://www.bsmhealth.org/financial-assistance">www.bsmhealth.org/financial-assistance</a> <a href="http://www.mercy.com/financial-assistance">www.mercy.com/financial-assistance</a>	
<i>Telephone</i>	1-855-732-0138	
<i>By Mail</i>	Mercy Health Public Benefits Dept PO Box 631774 Cincinnati, OH 45263-1774	
<i>In Person</i>	<p><b>Mercy Health - Anderson Hospital</b> 7500 State Road Cincinnati, OH 45255 Dept: Financial Counseling</p> <p><b>Mercy Health – Clermont Hospital</b> 3000 Hospital Drive Batavia, Ohio 45103 Dept: Financial Counseling</p> <p><b>Mercy Health – Fairfield Hospital</b> 3000 Mack Road Fairfield, Ohio 45014 Dept: Financial Counseling</p> <p><b>The Jewish Hospital – Mercy Health</b> 4777 E. Galbraith Road Cincinnati, Ohio 45236 Dept: Financial Counseling</p> <p><b>Mercy Health – West Hospital</b> 3300 Mercy Health Blvd., Cincinnati, Ohio 45211 Dept: Financial Counseling</p> <p><b>Mercy Health – Kings Mills Hospital</b> 5440 Kings Island Drive Mason, Ohio 45040 Dept: Financial Counseling</p> <p><b>Mercy Health - Springfield Regional Medical Center</b> 100 Medical Center Drive (at West North St) Springfield, Ohio, 45504 Dept: Financial Counseling</p> <p><b>Mercy Health – Urbana Hospital</b> 904 Scioto St, Urbana, OH 43078 Dept: Financial Counseling</p> <p><b>Mercy Health - St. Rita’s Medical Center</b> 730 W. Market St. Lima, OH 45801 Dept: Financial Counseling</p> <p><b>Mercy Health - Lourdes Hospital</b> 1530 Lone Oak Rd Paducah, KY 42003 Dept: Financial Counseling</p>	<p><b>Mercy Health - St. Anne Hospital</b> 3404 W. Sylvania Avenue Toledo, OH 43623 Dept: Financial Counseling</p> <p><b>Mercy Health - Defiance Hospital</b> 1404 E. Second Street Defiance, OH 43512 Dept: Financial Counseling</p> <p><b>Mercy Health - Tiffin Hospital</b> 45 St. Lawrence Drive Tiffin, OH 44883 Dept: Financial Counseling</p> <p><b>Mercy Health - Willard Hospital</b> 1100 Neal Zick Rd. Willard, OH 44890 Dept: Financial Counseling</p> <p><b>Mercy Health – Perrysburg Hospital</b> 12623 Eckel Junction Rd. Perrysburg, OH 43551 Dept: Financial Counseling</p> <p><b>Mercy Health - St. Elizabeth Youngstown Hospital</b> 1044 Belmont Ave. Youngstown, OH 44501 Dept: Financial Counseling</p> <p><b>Mercy Health - St. Elizabeth Boardman Hospital</b> 8401 Market St. Boardman, OH 44512 Dept: Financial Counseling</p> <p><b>Mercy Health - St. Joseph Warren Hospital</b> 667 Eastland Avenue Warren, Ohio 44484 Dept: Financial Counseling</p> <p><b>Mercy Health – Lorain Hospital</b> 3700 Kolbe Rd. Lorain, OH 44053 Dept: Financial Counseling</p>

<p><b>Mercy Health - Marcum and Wallace Hospital</b> 60 Mercy Court Irvine, KY 40336 Dept: Financial Counseling</p> <p><b>Mercy Health - St. Vincent Medical Center</b> 2213 Cherry Street Toledo, OH 43608 Dept.: Financial Counseling</p> <p><b>Mercy Health - St. Charles Hospital</b> 2600 Navarre Avenue Oregon, OH 43616 Dept.: Financial Counseling</p>	<p><b>Mercy Health - Allen Hospital</b> 200 W. Lorain St. Oberlin, Ohio 44074 Dept: Financial Counseling</p>
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**Information:**

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

<i>Website</i>	<a href="http://www.bsmhealth.org/financial-assistance">www.bsmhealth.org/financial-assistance</a> <a href="http://www.fa.bonsecours.com">www.fa.bonsecours.com</a>	
<i>Telephone</i>	804-342-1500 (Local Richmond) 877-342-1500	
<i>By Mail</i>	Bon Secours Mercy Health Financial Aid P.O. Box 631360 Cincinnati, OH 45263-1360	
<i>In Person</i>	<p><b>Bon Secours St. Francis Medical Center</b> 13710 St. Francis Boulevard Midlothian, VA 23114 Dept: Financial Counseling</p> <p><b>Bon Secours – Richmond Community Hospital</b> 1500 N. 28th Street Richmond, VA 23223 Dept: Financial Counseling</p> <p><b>Bon Secours Memorial Regional Medical Center</b> 8260 Atlee Road Mechanicsville, VA 23116 Dept: Financial Counseling</p> <p><b>Bon Secours St. Mary’s Hospital</b> 5801 Bremono Road Richmond, VA 23226 Dept: Financial Counseling</p> <p><b>Rappahannock General Hospital</b> 101 Harris Road Kilmarnock, VA 22482 Dept: Financial Counseling</p> <p><b>Bon Secours – Southside Medical Center</b> 200 Medical Park Blvd Petersburg, VA 23805 Dept: Financial Counseling</p>	<p><b>Bon Secours Mary Immaculate Hospital</b> 2 Bernadine Dr Newport News, VA 23602 Dept: Financial Counseling</p> <p><b>Bon Secours Maryview Medical Center</b> 3636 High Street Portsmouth, VA 23707 Dept: Financial Counseling</p> <p><b>Bon Secours Health Center at Harbour View (Ends May 2025)</b> 5818 Harbour View Boulevard Suffolk, VA 23435 Dept: Financial Counseling</p> <p><b>Bon Secours Harbour View Medical Center (Begins May 2025)</b> 1020 Bon Secours Drive Suffolk, VA 23435 Dept: Financial Counseling</p> <p><b>St. Francis Downtown</b> One St. Francis Drive Greenville, SC 29601 Dept: Financial Counseling</p> <p><b>St. Francis Eastside</b> 125 Commonwealth Drive Greenville, SC 29615 Dept: Financial Counseling</p> <p><b>St. Francis Millennium</b> 2 Innovation Drive Greenville, SC 29607 Dept: Financial Counseling</p>

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	<p><b>Bon Secours - Southern Virginia Medical Center</b> 727 N Main Street Emporia, VA 23847 Dept: Financial Counseling</p> <p><b>Bon Secours Southampton Memorial Hospital</b> 100 Fairview Drive Franklin, VA 23851 Dept: Financial Counseling</p>	
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