

ADM 02.00 Patient/Guarantor Bill Repayment Plan	
Original Date: 1/1/2015	Effective Date: 8/29/2023
Number: ADM 02.00	Version: 8
Facility (Scope): Organization-wide	

POLICY STATEMENT:

It is the policy of Roundup Memorial Healthcare (RMH) to expect prompt and reasonable payment from patients/guarantors who incur debts at the hospital or clinic for care.

PROCEDURE:

1. RMH offers the following discount program to patients/guarantor:
 - A. Patients/guarantors who have no medical insurance will receive a 10 percent discount off their bill if paid within 60 days of the service date.
 - B. Patients/guarantors who have medical insurance will receive a 10 percent discount on remaining balances once insurance has fully paid if the patient/guarantor pays off the balance within 60 days after all insurance has paid.

2. RMH offers the following payment plans to patients/guarantors who are unable to pay off their balances within 30 days.
 - A. Balances of \$300 or less – three equal monthly payments or a minimum of \$50 per month.
 - B. Balances greater than \$300 but equal to or less than \$600 – six equal monthly payments.
 - C. Balances greater than \$600 but equal to or less than \$1200 – 12 equal monthly payments.
 - D. Balances greater than \$1200 but equal to or less than \$2400 – 24 equal monthly payments.
 - E. Balances greater than \$2400 – A payment plan will be set up for not less than \$100 but not more than two percent of the original balance per month until the account is paid off.

3. If a patient/guarantor is having financial difficulties, they are encouraged to apply to the hospital’s financial assistance program. The CEO in consultation with the Business Office Manager may grant deferments to this policy in situations of hardship.

4. If a patient/guarantor fails to follow this procedure or fails to keep up with payments, their accounts will be turned over to collections in accordance with established policies.

ADDITIONAL POLICY INFORMATION:

Type: CAH 2-Year Review	Owner: Heather Welch, Business Office Manager
Replaces: None	
Committee/Date: None	
Other required review/approval(s) (name, title, date): Holly Wolff, CEO	
Regulatory or Accreditation Agency:	