



Appendix B – Payment Plan Guidelines	RC-002 Appendix B
Penn State Health Revenue Cycle	Effective Date: February 2025

SCOPE AND PURPOSE *The document is applicable to the people and processes of the following Penn State Health components specified below:*

<input checked="" type="checkbox"/> Penn State Health Shared Services	<input type="checkbox"/> Penn State College of Medicine
<input checked="" type="checkbox"/> Milton S. Hershey Medical Center	<input checked="" type="checkbox"/> Medical Group – Academic Practice Division
<input checked="" type="checkbox"/> St. Joseph Medical Center	<input checked="" type="checkbox"/> Medical Group - Community Practice Division
<input checked="" type="checkbox"/> Holy Spirit Medical Center	<input checked="" type="checkbox"/> Penn State Health Life Lion, LLC
<input checked="" type="checkbox"/> Hampden Medical Center	<input checked="" type="checkbox"/> Pennsylvania Psychiatric Institute
<input checked="" type="checkbox"/> Lancaster Medical Center	

POLICY AND PROCEDURE STATEMENTS

To define how the customer service and financial counseling staff will provide patients with the ability to satisfy the personal obligation through pre-arranged monthly payments.

- A payment plan will be established when a patient is not able to pay the outstanding balance(s) in full and can be established over the telephone, in person, or via mail/email.
- The staff member researches the patient accounting system for the patient and other family members' accounts. Each family member should be a separate payment plan.
- In order to satisfy the outstanding balance(s), a separate payment plan should be established in each patient accounting system.
- Staff should indicate the acceptable biweekly or monthly payment plan.
 - If the patient is unable to pay the amount biweekly or monthly in time frame, a discussion should take place regarding PSH Financial Assistance.
- The required monthly payment will be established using the following guidelines:

Balance Amount	Number of Biweekly Installments	Number of Monthly Installments
\$50-\$2000	4,9,13,19,26	2,4,6,9,12
\$2001-\$2500	4,9,13,19,26,32	2,4,6,9,12,15
\$2501-\$3000	6,13,19,26,32,39	3,6,9,12,15,18
\$3001-\$3500	6,13,19,26,32,39,45	3,6,9,12,15,18,21
\$3501-\$4500	9,13,26,32,39,52	4,6,12,15,18,24
\$4501-\$7500	3,26,32,39,52,65	6,12,15,18,24,27,30
\$7501 and above	13,26,39,52,65,77,90	6,12,18,24,30,36,42

- Payment plans cannot be created for balances less than \$50.
- The minimum installment amount is \$25 per month but will vary based on the balance size and timeframe the guarantor has elected to set for their payment plan.

See a manager for exceptions. Management may approve payment plans outside of the guidelines for extenuating circumstances.

RELATED POLICIES AND REFERENCES

RC-002 PATIENT CREDIT AND COLLECTIONS POLICY

APPROVALS

Authorized:	Paula Tinch, Senior Vice President and Chief Financial Officer
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