

Appendix B – Payment Plan Guidelines	RC-002 Appendix B				
	Effective Date:				
Penn State Health Revenue Cycle	April 2021				
SCOPE AND PURPOSE The document is applicable to the people and processes of the following Penn State Health components specified below: X Penn State Health Shared Services Penn State College of Medicine					

	of E mile i exi obe the document is up	piic	ubie to the people and processes of the following
Penr	n State Health components specified below:		
X	Penn State Health Shared Services		Penn State College of Medicine
	Milton S. Hershey Medical Center		Medical Group – Academic Practice Division
	St. Joseph Medical Center		Medical Group - Community Practice Division
	Holy Spirit Medical Center		Penn State Health Life Lion, LLC
	Hampden Medical Center (effective		•
	10/1/21)		

POLICY AND PROCEDURE STATEMENTS

To define how the customer service 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 customer service staff member researches the Signature and Eclipsys billing systems 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 Signature and Eclipsys billing systems.
- Customer service staff should indicate the acceptable (standard) payment plan and ask the patient what **monthly payment they can afford.**
 - o The Standard Agreement amount should be used first. If the patient is unable to pay the amount in the Standard Agreement time frame, a discussion should take place regarding Financial Assistance. A payment between the "standard agreement" and "allowable exception" may be accepted as an exception.
- The required monthly payment will be established using the following guidelines:

Payment Guidelines					
Outstanding Balance	Standard Agreement	Allowable Exception			
\$0-\$199	Due Now	-			
\$200-\$499	4 Months	6 Months			
\$500-\$999	8 Months	12 Months			

Payment Guidelines				
Outstanding Balance Standard Agreement		Allowable Exception		
\$1000-\$5000	12 Months	15 Months		
>\$5001	18 Months	24 Months		

If the patient is not able to pay according to the above guidelines, an application must be completed

• Outstanding balances less than \$200.00 will not be granted a monthly payment under \$50.00.

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	
Approved:	Dan Angel, Vice President, Revenue Cycle

DATE OF ORIGIN AND REVIEWS

Date of origin: 7/16/19 Review Date(s): 4/15/21

CONTENT REVIEWERS AND CONTRIBUTORS

Manager, Financial Counselors