

FACILITY: Tower Health at Home		
MANUAL: Tower Health at Home		FOLDER: General
TITLE: Internal/External Collections		DOCUMENT OWNER: VP, Nursing & Operations
DOCUMENT ADMINISTRATOR: Sr. VP, Chief Nursing Officer		KEYWORDS:
ORIGINAL DATE: 7/2026	DATE OF REVIEW:	REVISION DATE(S):

SCOPE:

Applies to Tower Health at Home

PURPOSE:

To define when accounts become delinquent and collection efforts are necessary, appropriate and permissible.

POLICY:

Tower Health at Home (THAH) utilizes both in-house staff and third parties to perform collection activities in order to be reimbursed for services performed. As required by Internal Revenue Code 501r, THAH conforms to said code as it pertains to “extraordinary collection actions” (e.g. lawsuits, arrests, liens, or other similar actions).

- A. In-House Collection Practices: Patient Financial Service representatives (PFS) are to adhere to the following practices:
- A.1. Uninsured (“Self-Pay”) Payment Rate: Patients with no insurance, and who do not qualify for Medical Assistance or THAH Patient Financial Assistance, will be provided a payment rate of 70% of amounts generally billed (AGB). The adjustment to total charges will be applied to the account at the time of billing.
 - A.2. Training and Education – Patient Financial Services representatives and all staff that interact with patients or have any responsibility within the billing and collection functions must be trained and educated on the Patient Financial Assistance application and the Commitment to Providing Affordable Care (C2PAC).
 - A.3. Collection Practices – All patient/guarantor accounts are pursued fairly. Three (3) statements, specifying amount due and appropriate detailed instructions are sent to patients every 30 days that a balance remains. Each statement shall contain a Patient Financial Assistance application with instructions and appropriate contact information.
 - A.4. Ethics and Integrity – All collection activities consistently reflect the highest standards of ethics and integrity and be consistent with the mission of THAH with respect to the dignity of each individual.

A.5. Reasonable Payment Terms – Reasonable payment plans and terms shall be offered to each patient/guarantor with self-pay balances, after an initial payment is received. These payment plans shall not accrue interest at any time.

- THAH encourages all patients to pay in full, however, payment plans may be used if outstanding balances warrant.
- The minimum payment on a payment plan is \$25.00 per month with a term not to exceed 18 months. Payments must be paid monthly by the due date.
- Extenuating circumstances may be taken into consideration with approval; however, payment plan terms may not exceed 24 months.
- Payments must be made in accordance with the payment plan agreement to avoid delinquency. A confirmation letter is sent to the patient outlining the agreed-upon payment plan, including notification that any delinquency during their agreement period will result in the account being sent to collections.

A.6. Cooperating Efforts – no account is sent to a collection agency while the patient/guarantor is actively working with a THAH Patient Financial Services representative to resolve the open account.

A.7. Transfer to External Collection Agency – A reasonable review is performed prior to turning an account over to a third-party collection agency. This review occurs after a patient has received at least three (3) statements requesting payment or additional information.

If the patient/guarantor is not responsive after receiving statements and/or direct phone contact, the account can be transferred to a collection agency.

A.8. Notification to Patient – Patients are notified thirty (30) days before their account is sent to a third-party collection agency.

A.9. Epic RCM Account Closure: When transferred to the collection agency, the account is closed off the Epic RCM system to a specific G/L code set up for this purpose.

B. Third-Party Collection Practices: Third-party collection agency performs the following steps:

B.1. Standards and Scope of Practices – Third-party collection agents follow the same standards as THAH Patient Financial Services referenced in policy section A, items A.1 through A.4.

B.2. Financial Assistance – The third-party collection agency continues to advise the patient/guarantor of the availability for THAH Financial Assistance, and if the patient demonstrates cooperation with providing necessary proof of income

documentation, Patient Financial Services staff will follow up appropriately for determination of patient financial assistance.

- B.3. Approval– The VP Nursing and Operations, in collaboration with Tower Health senior leadership, considers and must approve any legal actions that may be pursued by the third-party collection agent. No other extraordinary collection activities will be utilized.
- B.4. Credit Bureau Reporting – Accounts are reported to appropriate credit reporting agencies by the third-party collection agency.
- B.5. 365 – Day Limit – Unsettled accounts shall be returned by the third-party collection agency to THAH after 365 days if they are deemed uncollectable.
- B.6. Annual Adherence Attestation – THAH Revenue Cycle Team sends the current Financial Assistance Policy and an attestation to each collection agency for them to sign that they will act in compliance with this Policy. In addition, each third-party collection agency is reviewed annually by the THAH Revenue Cycle Team for adherence to these standards.

DEFINITIONS:

N/A

PROCEDURE:

N/A

GUIDELINE:

N/A

PROVIDER PROTOCOL:

N/A

EDUCATION AND TRAINING:

Applicable staff receive training pertaining to this policy and procedure.

REFERENCES:

N/A

COMMITTEE/COUNCIL APPROVALS:

CANCELLATION:

The content of this document supersedes all previous policies/procedures/protocols/guidelines, memoranda, and/or other communications pertaining to this document.

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