PAYMENT PLAN POLICY:
MercyOne Hospital/Clinics recognize that there are medical circumstances which can create a financial burden for our patients. Patients who are unable to meet their financial obligations in one payment may arrange for installments to be paid in accordance with MercyOne Hospital’s/Clinic’s policies and guidelines.

If the patient has coverage with a third-party payer, the remaining patient portion can be considered for payment agreements, as appropriate. MercyOne Hospital/Clinics offer a patient payment plan in order to assist patients in fulfilling their financial obligations. Payment in full is preferred; however, payment plans are available.

Internal payment plans may be established up to 3 months. Any payment plan request extending beyond 3 months will be referred and processed with Healthfirst Financial Loan Program. Healthfirst provides 0% interest for payment terms up to 12 months and a low 4% interest rate for terms 13-60 months (standard term is 24 months with a $25 minimum payment).

Representatives are responsible for establishing and/or amending all payment arrangements. The Customer Service Representative who establishes the payment plan will be responsible for entering all information into the system.

GENERAL GUIDELINES:
The following guidelines are to be followed by all personnel:

a) Verify that all third party payers have been loaded into the system.
b) Verify that the patient does not have previous accounts with an outstanding balance. If there are multiple accounts with balances due, a payment plan needs to be established on all accounts.

c) Patient payment plans are not allowed if insurance benefits were not assigned but were paid directly to the patient and the patient chooses not to remit them to MercyOne Hospital/Clinics.

d) Patient payment plans are not allowed to be scheduled for elective services. All elective services are to be paid in full prior to services rendered.

e) Determine if other methods of payments are possible (i.e., check by phone, credit cards, family members, etc.). If yes, secure payment via phone or document the expected date in the system.

f) Internal payment plans can be established up to 3 months. Any payment plan request extending beyond 3 months will need to be processed with Healthfirst Financial (loan program).

g) If unable to comply with these guidelines, refer to the Financial Assistance policy.

h) No plans should be established with any patient under the age of (18)

i) Advise patient/guarantor that all future services are payable in the usual manner and will not be automatically added to the patient’s current payment plan.

j) All requests to add future charges to an existing patient payment plan will be treated as a new request and evaluated accordingly.

k) In the event the payment is late, all prior amounts plus the current payment due must be received in order to reactive the payment arrangement.

l) Default in a patient/guarantor’s payment plan may result in a final notice letter being sent.

m) Failure to bring a payment plan to a current status will result in a transfer to a collection agency 30 days from the final notice.