

# COLLECTION POLICY

**Origination Date:** May 1, 2019

**Effective/Revised Date:** October 1, 2024

**Approved By:** i-Health Board of Directors

**Policy Department Owner:** Brandon Janike, VP of Revo Health Revenue Cycle

## **SCOPE:**

This policy applies to patient balances across all Infinite Health Collaborative (i-Health) divisions. A full list of i-Health divisions can be found at i-Health.com. Collections for i-Health are managed by Revo Health.

## **PURPOSE:**

To define and outline the policy and procedure to recover balances that are due to i-Health, within a timely and reasonable manner.

## **POLICY:**

This policy defines and outlines i-Health's policy to recover patient account balances that are due within a timely and reasonable manner. It is the policy of i-Health to bill patients and payors (when applicable) accurately and according to required processing timelines. Our operations incorporate regular oversight and quality processes and follows guidelines for accurate account handling in accordance with federal and state statutes. To provide patient/customer communication; industry practices of billing statements, written and verbal notifications, and other related technologies are used to inform patients of their account balances and financial responsibilities. When working with patients to resolve outstanding balances, a reasonable payment plan will be extended. Medical debt will not be transferred to a spouse or reported to a consumer credit agency. This policy will be made available publicly, via our website, and by requests from any individual.

## **PROCEDURE:**

Patient account balances are actively worked by the account resolution team beginning at day 45 in the aging cycle.

Identified accounts will be addressed with a reasonable payment plan established with the patient, up to a maximum of 12 months. Monthly payments are deemed reasonable based on U.S. Census Bureau reported data with a minimum monthly payment representing less than 5% median Minnesota household family income.

After 120 days, if the patient has not resolved their (\$100 minimum) balance, or set up a reasonable payment plan, the account will be transferred to an outside collection agency. The medical debt is then considered uncollectible and sent to an outside collection agency after reasonable, internal collection efforts are exhausted.

Review of patient accounts are not prohibitive of addressing immediate patient care concerns and will not cause unreasonable delay in treatment. Patients are still subject to our policies defined payment plan.

## **REFERENCE:**

[https://www.revisor.mn.gov/bills/text.php?number=SF4097&version=latest&session=ls93&session\\_year=2024&session\\_number=0#pl.94.16](https://www.revisor.mn.gov/bills/text.php?number=SF4097&version=latest&session=ls93&session_year=2024&session_number=0#pl.94.16)