 <p><b>POLICY AND PROCEDURE</b></p>	<b>Code No. BO 006</b>
	Page 1 of 2
	Effective Date: 01/31/2000 Latest Review: 05/07/2026 Board Approved: 05/28/2026
<b>DEPARTMENT: BUISNESS OFFICE</b>	
<b>SUBJECT: Collections - Self Pay Balances</b>	

*Printed copies are for reference only. Please refer to the electronic copy for the latest version.*

**PURPOSE:**

To ensure diligent efforts to inform patients of their financial responsibilities and available assistance options as well as follow up with patients regarding outstanding accounts.

**SCOPE:**

Billing Clerks

**COMPLIANCE RESPONSIBILITY:**

Business Office Manager

**POLICY:**

It is the policy of Good Samaritan Hospital to resolve all self-pay balances in a timely manner, while ensuring patients are informed of their financial assistance rights and are given every opportunity to apply for available assistance programs before collection activity is initiated.

**PROCEDURE:**

Upon determination of the patient due amounts, the following daily rates should be in place.

**Self-Pay (In Patient)**


Medical Surgical	\$2,500.00 per daily rate
Detox M/S	\$2,500.00 per daily rate
Psychiatric	\$1,500.00 per daily rate

Rates include facility charges only. Physician, consulting, and any ancillary charges will be billed separately.

**Self-Pay (Out Patient)**

- Outpatient Surgery: 100% Medicare Rate
- Ancillary Charges: 100% Medicare Rate

*These guidelines, procedures, or policies herein do not represent the only medically or legally acceptable approach but rather are presented with the recognition that acceptable approaches exist. Deviations under appropriate circumstances do not represent a breach of a medical standard of care. New knowledge, new techniques, clinical data, clinical experience, or clinical or bio-ethical circumstances may provide sound reasons for alternative approaches, even though they are not described in the document.*

 <p><b>POLICY AND PROCEDURE</b></p>	<b>Code No. BO 006</b>
	Page 2 of 2
	Effective Date: 01/31/2000 Latest Review: 05/07/2026 Board Approved: 05/28/2026
<b>DEPARTMENT: BUISNESS OFFICE</b>	
<b>SUBJECT: Collections - Self Pay Balances</b>	

- An initial bill will be sent for the balance to the patient.
- Accounts will be referred to the collector for review.
- Accounts will receive monthly statements with current balance due.

### **COLLECTIONS**

Once accounts have reached 90 days old, they are considered delinquent. At this time, a final notice will be sent to all patients with outstanding balances.

All telephone contact will be done by the following company:

Good Samaritan Hospital  
901 Olive Dr  
Bakersfield, CA 93308  
661-215-7799

At day 30, if no response, continue to call documenting each contact and/or attempt to contact.

At day 90, if payment is not received and patient has not set up a reasonable payment plan or has defaulted on the payment plan, a final notice is sent listing the balance due and possible collection action.

**At day 180**, the account is reviewed for collections agency placement, provided that the Hospital has either: (a) found the patient ineligible for financial assistance, or (b) the patient has not responded to any attempts to bill or offer financial assistance during this 180-day period. Patient debt shall not be sold to a debt buyer unless one of these two conditions has been met.

Information obtained from income tax returns, paystubs, or monetary asset documentation collected for the purposes of discount payment or charity care eligibility determinations cannot be used for collection activities.

A report will be sent to the Business Office Manager for further collections process.

The accounts will need the approval of the Business Office Manager to be forwarded to the current collections agency.

### **REFERENCE:**

*These guidelines, procedures, or policies herein do not represent the only medically or legally acceptable approach but rather are presented with the recognition that acceptable approaches exist. Deviations under appropriate circumstances do not represent a breach of a medical standard of care. New knowledge, new techniques, clinical data, clinical experience, or clinical or bio-ethical circumstances may provide sound reasons for alternative approaches, even though they are not described in the document.*