

## **COLLECTION POLICY**

Accounts will not be sent to a collection agency if the patient is attempting in good faith to settle the account by negotiating a payment plan or is making regular partial payments. Any extended payment plans negotiated with a qualified patient under the discounted fee arrangement must be provided without interest so long as the patient does not default on their payment arrangement.

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If a patient is appealing a denial of insurance coverage or payment and is making a reasonable effort to keep the AHMC hospital informed of the patient's appeal, the account should not be reported to a consumer credit reporting agency until a final determination is made on the appeal. In any event, for an uninsured patient or for a patient who may be a patient with high medical costs, AHMC and the AHMC hospitals shall not report adverse information to a consumer credit reporting agency or commence civil action against the patient for nonpayment for at least 180 days after initial billing.

Accounts may be sent only to collection agencies that have been provided with, and have agreed in writing to abide by, the hospital's standards and scope of practices for the collection of debt.