



## ESSENT HEALTHCARE, INC.

---

<b>Section:</b>	<b>Corporate Compliance</b>	<b>Effective Date:</b>	<b>4/15/05</b>
<b>Subject:</b>	<b>Collection of Co-payment Amounts</b>	<b>Revision Date:</b>	<b>6/03/08</b>
<b>Policy #:</b>	<b>CC-18</b>	<b>Review Date:</b>	<b>11/19/09</b>
<b>Responsible Party:</b>	<b>Corporate Compliance Officer</b>	<b>Revision #:</b>	<b>2</b>

---

**Scope:**

This policy applies to all Essent facilities.

**Purpose:**

The purpose of this policy is to outline the requirements related to collection of co-payment or coinsurance amounts due from patients.

**Policy:**

It is the policy of all Essent Hospitals to collect copayment amounts due from patients at the time service is provided except in the Emergency Department as outlined below. Routine waiver of deductibles and/or co-payments is prohibited unless there is a documented financial hardship.

---

**Definitions:**

***Medical Screening Exam*** – The process required to reach, with reasonable clinical confidence, the point at which it can be determined whether an emergency does or does not exist. A medical screening exam may range from simple to complex depending on presenting complaint or symptoms.

***Emergency Medical Condition*** – A condition manifested by acute symptoms of sufficient severity such that the absence of immediate medical treatment could result in: placing the health of the individual in serious jeopardy; serious impairment of bodily functions; or serious dysfunction of any bodily organ or part.

**Procedure:**

1. Patients (or their insurance companies) should be queried regarding insurance coverage and out-of-pocket requirements at the time of registration (except in the Emergency Department as described below).



## ESSENT HEALTHCARE, INC.

---

<b>Section:</b>	<b>Corporate Compliance</b>	<b>Effective Date:</b>	<b>4/15/05</b>
<b>Subject:</b>	<b>Collection of Co-payment Amounts</b>	<b>Revision Date:</b>	<b>6/03/08</b>
<b>Policy #:</b>	<b>CC-18</b>	<b>Review Date:</b>	<b>11/19/09</b>
<b>Responsible Party:</b>	<b>Corporate Compliance Officer</b>	<b>Revision #:</b>	<b>2</b>

---

2. Patients should be informed of their financial obligations at the time of registration except in the Emergency Department as described below.
3. Co-payments should be collected at the time the service is provided. This is normally accomplished during patient registration, at checkout, or in the department that is providing the service with the exception of the Emergency Department as described below.
4. Attempts to collect co-payments should be documented in the appropriate information system.
5. So that we may fully comply with the requirements of the Emergency Medical Treatment and Labor Act (EMTALA), *the following procedures apply only to the Emergency Department (ED)*:
  - a. Patients who come to the ED requesting treatment must receive an appropriate medical screening exam (MSE) before any co-payments are requested or any financial liability is discussed.
    - i. An appropriate MSE is the process required to reach (with reasonable clinical confidence), the point at which it can be determined whether a medical emergency does or does not exist.
    - ii. The MSE must be conducted by an individual who is determined qualified by hospital by-laws (usually a physician, physician assistant, or nurse practitioner).
  - b. The appropriate process for registration and collection of copayments in the ED must recognize the following guidelines:
    - i. Triage is not a medical screening exam – triage merely determines the order in which patients will be seen.
    - ii. The ED may follow reasonable registration procedures prior to completing the MSE. Reasonable registration procedures include obtaining consent for treatment and asking for an insurance card, next of kin, emergency contacts, and other demographic information. Reasonable registration procedures prior to



## ESSENT HEALTHCARE, INC.

---

<b>Section:</b>	<b>Corporate Compliance</b>	<b>Effective Date:</b>	<b>4/15/05</b>
<b>Subject:</b>	<b>Collection of Co-payment Amounts</b>	<b>Revision Date:</b>	<b>6/03/08</b>
<b>Policy #:</b>	<b>CC-18</b>	<b>Review Date:</b>	<b>11/19/09</b>
<b>Responsible Party:</b>	<b>Corporate Compliance Officer</b>	<b>Revision #:</b>	<b>2</b>

---

completion of the MSE must not include notifying the patient of any financial liability or in any way discourage the patient from seeking treatment, or remaining for treatment.

- iii. Requests for payment by hospital personnel must never be made prior to completion of the MSE. If a patient requests that we accept payment during the registration process we will honor such request only if the request is initiated by the patients and does not delay treatment.
- c. Medical Screening Exams and/or stabilizing treatment should never be delayed in order to collect insurance information, obtain financial liability statements, and/or collect co-payment amounts.

### **References:**

The Emergency Medical Treatment and Labor Act (EMTALA)  
OIG Special Advisory Bulletin on Patient Anti-Dumping Statute  
Essent Employee Guide to EMTALA