

**HACKETTSTOWN COMMUNITY HOSPITAL**  
**Administrative Policy and Procedure**

**SECTION: FINANCE**

**Number: FI14**  
**Number of Pages: 1 of 3**  
**Issue Date: September 1996**  
**Reviewed/Revised: January 2008**

**TITLE: PATIENT CHARGES**

---

**PURPOSE:**

To record all of the billable services/treatment/procedures given to every patient/customer served by the Hospital.

**POLICY:**

Every Department/Unit is responsible for submitting all billable services provided to patients on date of service to Information Systems to ensure accurate bills and to prevent late charges. Information Systems is responsible for entering charges and providing a report to each department/unit within twenty-four (24) hours of receipt of charge tickets/slips to verify accuracy of data entered. All billable services require approval by the Finance Department and entered into the Charge Master prior to charging a patient account. Requests for exceptions must be approved by the Keeper of the Charge Master. The computerized billing system automatically drops bills within five (5) days of the date of service for outpatients and seven (7) days from discharge date for inpatients. Verification of accuracy of data entry, corrections and additions must be completed within this time frame for the Hospital to receive accurate and prompt payment. Any delays can cause loss of payment, time-consuming paperwork and poor customer satisfaction. Therefore, the following procedure ensures timely recording of services.

**PROCEDURE:**

**Outpatient Charges**

- \* The patient's Addressograph Card must be used by staff to accurately charge patients' account. Each Charge Ticket/Slip used by the Department/Unit must have a patient's Addressograph card stamped on it.
- \* Each staff member who is providing services must immediately record/check services on the Charge Ticket/Slip.
- \* Prior to discharging the patient from the Department/Unit, staff must verify that all billable services provided to the patient were accurately recorded on the Charge Ticket/Slip.
- \* Prior to charging a patient for services, the billable services must be approved by the Finance Department and included on the Charge Master.

**FI14 – PATIENT CHARGES**

- \* New billable services require the Manager of the Department to notify the Finance Department to request the addition to the Charge Master. (See Policy & Procedure for New Charges). The Finance Department must approve the billing of the service before a patient account may be charged.
- \* Billable Services not on the Charge Master may cause a “Hold” on the patient’s bill until approval is received from the Finance Department.
- \* Each Department/Unit must designate a person to review every patient charge ticket/slip to check accuracy of staff documentation of services given. No outpatient will leave the attendance of a staff member without recording all billable services on the appropriate Charge Ticket/Slip.

### **Inpatient Charges**

- \* Inpatient Charge Tickets/Slips are used to accurately bill patient accounts for billable services and equipment usage specified on the Charge Master that are extra services beyond the daily Room & Board Rate.
- \* Daily supplies recorded on Material Cards must be submitted daily to Information Systems.

### **Submission of Charge Ticket/Slips & Material Cards**

Monday through Friday, at least once per day, the Charge Tickets/Slips must be grouped together with a Batch Header Sheet (See Attachment 1 for instructions for completing the Batch Header Sheet).

- \* Information Systems will set-up the daily schedule in consultation with the Manager of each Department/Unit to pick up the Batched Charge Tickets/Slips.
- \* Patient’s Charge Tickets/Slips are submitted to Information Systems on the date of service, except for weekends and holidays, then each Department/Unit has the responsibility for dropping off the Batched Charge tickets/Slips in the Black Box outside the Information Systems Door each day.

### **Verification of Charge Ticket/Slip & Material Cards**

- \* Within 24 hours of delivering to Information Systems, the Department/Unit receives a report back of the Charge Ticket/Slip & Material Card services/supplies billed to each patient’s account to verify the accuracy of charges entered into the Billing System.

**Reviewed/Revised: January 2008**

- \* Within 24 hours of receipt of this Batch Charge Ticket/Slip Report the staff must report corrections to Information Systems.
- \* Corrections submitted later than 24 hour turn-around time will result in late charges and these charges will be excluded on the first bill to the payer.
- \* A corrected bill or second patient bill with the correct charges may cause review of the Medical Record and delay in payment.

## DISTRIBUTION OF DAILY CHARGES BY BATCH

<u>BATCH RANGE</u>	<u>DEPARTMENT</u>	<u>CHARGE NUMBERS</u>
001-050	Emergency Room Secretary	423, 424, 405, 730
051-075+	Cardiology/EKG	411, 412, 449
076-175	Lab	406, 410
176-200	Materials Management - Estelle	405
201-225	Dietary	318
226-235	3 North Secretary	301
236-249	SDS – Outpatient Treatment	308,309
250-260	OB – Nurse’s Aide	316, 317, 401
261-270	Healthstart – Yolanda	318
271-325	Healthstart – Beth	318
326-350	OR	402, 404
351-360	Minor Procedures	424
361-370+	Audiology	421
371-380+	Echocardiogram	430
381-400	Social Service	318
401-425+	Physical Therapy	420
426-450	Pathology	407
451-460+	Occupational Therapy	450
461-475+	Cardiac Rehab	411, 420, 460, 444
476-525	Radiology	413, 414, 415, 416
526-550	PACU	402
551-575+	Respiratory Therapy	418, 431
576-600	Counseling & Addiction	441
601-625	Corporate Health	443
626-649+	Speech Therapy	422, 462
650-850*	Pharmacy	417, 419 (do not distribute)
670-670*	Nursing Services	426
800-840	Information Systems	Misc.
851-874	Patient Business	Misc.
875-899	Registration – Pauline	Misc.
900-999	Reserved & Automatic Charges	Misc. (Do not distribute)

\*Note: Duplicate batch numbers

+Put in one envelope and address it to Elsie, Rehab Services

Effective date 3-26-96