**THE EYE INSTITUTE FOR MEDICINE & SURGERY**

**POLICY/PROTOCOL**

**COLLECTING OF COPAYMENTS ON CHARTS WHEN THE PHYSICIAN HAS NOT YET DETERMINED HIS OR HER BILLING CODES**

02292012

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Applies to: Front Desk Receptionists, Billing, Surgical Counselors, Clinic Supervisors, Dr. Vaishnav

If a patient has Medicare and has seen no other physicians this year and they have no coinsurance, we would normally collect the allowed amount of the listed services up to the Medicare deductible of $147 + 20% (2015) of the allowed amount on all additional services listed beyond this amount.  In the case noted above, if no codes are circled, you should not collect any amount.

If some codes are circled, i.e. a Fluorescein Angiography - both eyes) (92235, Fundus Photos (92250), and a refraction was performed and provided to the patient, even if no exam is as of yet noted, you could safely collect the full Medicare deductible and the refraction as the allowed amounts for these procedures exceed the deductible (you could also collect the 20% of the amount that exceeds this amount).

You inform the patient that the visit code has not yet been documented and that a member of our billing department will contact them regarding the additional charges that would be due and payable as soon as the correct code has been determined.

In the same example, if the patient had a copay insurance, you could collect the amount of the deductible and the refraction only (but none of the 20% above the deductible).

If the patient had already seen another physician this year but they DO NOT have a copay insurance, you could safely collect the 20% copay amount.  Again, you would have to inform the patient that there would be additional charges when the office visit code had been determined.

In a case where NO DIAGNOSTIC tests were performed and the only issue was the examination code, but the code has not been determined, you must explain this to the patient that once the office visit codes were determined, a member of our billing staff would contact them regarding payment.

Whenever you are informing a patient that they will be contacted, please email this to the Billing Lead and CEO so that we are aware of the need for follow up on the matter.

Because there are many different related scenarios that could present, you are urged to pose these to your supervisor.

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Authorized Signature/Date