Billing Procedure/Inpatient and Name of Policy: **Outpatient Services** THE UNIVERSITY OF TOLEDO MEDICAL CENTER **Policy Number:** 3364-137-FM-01 Rehabilitation Services **Department:** Chief Operating Officer - UTMC **Approving Officer: Effective Date:** 12/1/2022 Responsible Agent: Director, Therapy Services Rehabilitation Services Scope: Initial Effective Date: 11/1980

New policy proposal
Major revision of existing policy
X Minor/technical revision of existing policy

(A) Purpose of Policy

To assure that all patients will be properly and fairly billed for all services rendered by the Rehabilitation Services Department in a timely manner.

(B) Acute Procedure

All charges are to be completed and entered into the computerized charge entry system in compliance with business office procedures.

- 1. The current fee schedule will be established yearly by the Rehabilitation Services Director, or designee, and the hospital Finance Department. The fees charged shall be determined by ascertaining the acceptable and customary charges for each service in the area, and by considering the cost factor in providing the service.
- 2. A charge document will be initiated for each treatment rendered and entered into the charge entry system within established time frames, no less than 48 hours following the delivery of service. The specific procedure for entering the charge is established by the Data Services office. The person responsible for completing the charge documents is the professional rendering the service. The clerical personnel in the departments, or their designated back up, are responsible for entering charges into the billing system.
- 3. Clerical personnel will maintain the computer run sheets of charges entered daily.

(C) Outpatient Procedure

All charges will be completed and entered through Epic Electronic Medical Record in compliance with business office procedures.

1. The current fee schedule will be established yearly by the Rehabilitation Services Director, or designee, and the hospital Finance Department. The fees charged shall be determined by ascertaining the acceptable and customary charges for each service in the area, and by considering the cost factor in providing the service.

Clerical personnel may be asked by the Rehab Services Director to gather other information.

Periodic reviews of billing accuracy will be done.

Approved by:		Review/Revision Date:	
/s/ Alison Matson PT, DPT, NCS Director of Therapy Services	12/01/2022 Date	8/84 10/87 11/88 7/90 11/91	7/99 10/2000 2/2002 8/2003 7/2006
/s/ Christine Stesney-Ridenour, COO	12/01/2022 Date	8/91 3/93 3/96 2/98 3/98 9/98	11/1/2016 11/2019 12/2022
		Next Review Date: 12/1/2025	
Policies Superseded by This Policy: 23-FM-01			

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.