	Johns Hopkins Medicine JHM Revenue Cycle Policies and Procedures Patient Financial Services	<i>Policy Number</i>	PFS046
		<i>Effective Date</i>	10/07/2025
	<i>Subject</i> Self-Pay Collections	<i>Page</i>	1 of 5
		<i>Supersedes</i>	06/01/2020

This document applies to the following Participating Organizations:

Johns Hopkins All Children's Hospital	Johns Hopkins Bayview Medical Center, Inc.	Johns Hopkins Community Physicians	Johns Hopkins Health System Corporation
Johns Hopkins Howard County Medical Center	Johns Hopkins Imaging	Johns Hopkins Medicine International	Johns Hopkins Regional Physicians, LLC
Johns Hopkins Surgery Centers Series	Johns Hopkins University School of Medicine	Potomac Home Health Agency, Inc.	Sibley Memorial Hospital
Suburban Hospital, Inc.	The Johns Hopkins Hospital		

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I. POLICY

This policy applies to all JHM locations with the ability to collect cash, credit/debit card, check, and/or e-check payments.

II. PURPOSE

- A. Johns Hopkins Medicine (JHM) and its affiliates employ the same principles and standards for the collection of patient liabilities owed to the affiliates. This policy is applicable to all patients receiving services at a JHM affiliate who are considered self-pay (as defined in this policy) and are judged to be able to pay; that is, this policy applies to those who are not eligible for financial assistance or a special entitlement program.
- B. A self-pay account is defined as one that is not covered by any medical insurance or other indemnity, in whole or in part (co-payment, co-insurance, deductible, spend down, etc.), and for which the patient or guarantor is liable for payment.
- C. Maryland is the only state in which all payors (governmentally-insured, commercially insured, or self-pay) are charged the same price for services at any given Maryland hospital. Under this system, billing at Maryland hospitals is regulated by the Health Services Cost Review Commission (HSCRC) state agency. Only HSCRC approved discounts are allowed.
- D. Every JHM affiliate will comply with Fair Debt Collection Practices regarding the patient/guarantor. For self-pay accounts, the following post-treatment collection efforts shall be directed to the patient/guarantor:
 1. Phone calls, letters and/or data mailers
 2. Outside collection agencies and legal recourse

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- E. All JHM affiliates will use a standardized intensity and a time frame of no more than one hundred and twenty (120) days from the date that the account is placed in a self-pay status for completing the in-house collection process. Based on the affiliate's average collection balance and staffing constraints, each affiliate may set its own balance limits for purposes of automated bad debt write-off, personalized contact, etc.
- F. Patient accounts with JHM hospitals shall not be sold or transferred at any time to a factor, bank or other third-party entity.
- G. Delinquent patient accounts shall not be reported to a credit reporting agency.

III. SPECIAL CIRCUMSTANCES


- A. Pending Medical Assistance — External collection efforts may be initiated to qualify patients in cases of poor cooperation with in-house resources, deceased patients or other at-risk patients.
- B. Criminal Injuries Compensation Board Claims – Accounts subject to claims filed by patients with the Criminal Injuries Compensation Board (CICB) will be placed in the Special Billing financial class (and the “CIB Code for JHHS hospitals) to ensure no debt collection activity while the claim is pending. See Policy No. PFS061.

IV. SIBLEY MEMORIAL HOSPITAL AND JOHNS HOPKINS ALL CHILDREN'S HOSPITAL

- A. All patients that are registered as self-pay will receive a minimum discount on charges of 55% or at a rate established based on an approved fee schedule.

V. SPECIAL COLLECTIONS (See Policy No. PFS050)

- A. Bankruptcies — Account balances that are included in a bankruptcy filing will be held in abeyance until a final determination is made. Proofs of claim will be filed in support of each bankruptcy filing.
- B. Estate Claims – Claims will be filed against estates within six (6) months after the patient expires whenever there is an outstanding balance of over \$500 aggregate per patient. A claim will not be filed against the estate of a deceased patient if the patient was known to be eligible for free care or the value of the estate, after tax obligations, is less than half of the debt owed. All claims are subject to medical debt collection laws, including but not limited to §19-214.1 of the Maryland Code of Regulations (Health – General).
- C. Risk Management Accounts — The Corporate Legal Dept. must approve any activity on accounts that have outstanding risk management issues, as noted in the billing system.
- D. External Collections
 - 1. Johns Hopkins Medicine (JHM) and its affiliates shall provide active oversight of any contract for collection of patient accounts. Oversight shall include patient complaint resolution, non-financial reporting of complaints received from patients, the Consumer Protection Division of the Maryland Attorney General’s Office, the Maryland Department of Licensing, and any other state or federal agencies; audits of agency collection activity and performance; periodic meetings; and review, final authorization and approval before commencement of lawsuit, or settlements. Collection agencies shall direct all patients to send complaints against the agency and/or Hopkins regarding the handling of the patient’s bill to the director of RCM who, upon receipt, will investigate and respond. If a complaint is received by a collection agency concerning a patient account, the agency shall forward the complaint to the Director of Revenue Cycle Management, Single Billing Office for investigation and response. Collection agencies shall comply with the Fair Debt Collection Practices Act, the American Collectors Association Code of Ethics, and all applicable state and federal laws. See JHHS Finance Policy PFS057 – Collection Agencies Performance Standards.
- E. Exceptions
 - 1. All JHM affiliates have the prerogative to modify the standard collection cycle based on case-specific circumstances; for example, to expedite the cycle in cases of uncooperative debtors or undelivered/refused mail or slow the cycle if the debtor is making a good-faith effort and has provided insurance and/or other necessary information.
 - 2. Clinical sites should never attempt to collect on any patient liability on accounts with bad debt or a 'Do Not Bill' notice.

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3. Any deviations from this policy must be reviewed and approved by the Director of Revenue Cycle Management, Single Billing Office or a designee. Documentation describing the reason for the exception and approval for granting such an exception must be clearly documented in the patient's financial record.

VI. COLLECTIONS PROCEDURES


A. Collectors

1. Contact patient/guarantor to arrange for payment of patient liability and send letters to patient/guarantor to expedite payment.
2. Document all conversations and actions taken in an automated billing system.
3. Review self-pay accounts for those \$2,000 and over and prioritize follow-up using aging status below:
 - a. 0 to 30 days — Current
 - b. 30 to 60 days — Delinquent
 - c. Over 60 days — Seriously Delinquent
 - d. Monitor accounts under \$2,000 which are automatically billed with data mailers by the automated billing system.
4. Consolidate related accounts as appropriate.
5. Contact the patient/guarantor via telephone to determine the timing of paying the balance in full. Determine timing and frequency of contacts based on dollar balance, account age, billing cycle, and prior representations made by the patient/guarantor.
6. Correct any incorrect or missing demographic information in the automated billing system.
7. If the patient/guarantor claims to have paid this balance, request a copy of the canceled check or receipt number.
8. If the patient asserts inability to pay in full or in part, obtain household size, income, and available liquid assets (cash, bank accounts, stock accounts, bonds, etc.) to determine if the patient is qualified for JHM Financial Assistance Program:
 - a. If the patient appears qualified or if the patient requests free care, send an application.
 - b. If the patient does not appear to meet the qualifications, negotiate the shortest possible repayment terms in accordance with JHM Finance Policy No. PFS034 - Installment Payments. Set up installment plan in automated billing system.
9. Collect a balance on the undisputed portion of the disputed account, and resolve questions and conclude payment arrangements for the disputed portion of the account within 15 days.
10. Refer accounts with outstanding legal issues (bankruptcy, estate, possible litigation, criminal injuries compensation board claims, etc.) to supervisor for resolution or referral to the proper department.
11. Send a letter requesting immediate payment or contact a JHM Collection Representative to patient/guarantors who cannot be reached by telephone.
12. Record and re-queue the account for the expected payment date (allowing two days for posting) or for the return of the JHM Financial Assistance application.
13. Send to Legal Team to complete proof of claim for estate or bankruptcy processing as applicable.
14. Determine if an account is uncollectible and recommend placement with an external collection agency as appropriate.
15. Corporate Legal Dept.
 - a. Review accounts referred by Collection Dept. and provide guidance on the resolution of specific cases.
 - b. Complete proof of claim for estate or bankruptcy as applicable and monitor.
 - c. Please review your entity's legal policy for additional information regarding self-pay collection practices.

VII. CREDIT CARD AND E-CHECK PAYMENT PROCESSING WORKFLOW

A. Expectations for PCI Compliance

1. Use of Johns Hopkins owned and managed computer hardware is required for any systems involved in payment processing. Use of personal equipment for employees involved in Johns Hopkins payment processing is prohibited.

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2. All employees processing credit card payments or eCheck transactions, onsite employees and remote employees, are expected to use PCI Compliant devices such as Lane 3000 Encrypted Device, or SRED Keypad, or IT approved encrypted device.
 3. All departments that use a recorded line and take manual credit card payments are expected to perform routine audits for staff that take manual credit card payments. The expectation is that employees that take manual credit card payments while using a recorded line stop the recording when processing a credit card transaction.
- B. There are three workflows for processing patient payments. Refer to Appendix A for workflow used by the Single Billing Office.
1. MyChart
 2. IVR (Interactive Voice Response)
 3. Employee manually entered payments
- C. Expectations to Credit Card and eCheck — Refer to Appendix A for workflow used by Single Billing Office.
1. The patient/caller will be rerouted to the representative in the event there are technical challenges in processing the payment transaction.

VIII. REFERENCES

JHHS Finance Policies and Procedures Manual

- Policy No. PFS120 - Signature Authority: Patient Accounts
- Policy No. PFS34 - Installment Payments
- Policy No. PFS035 - Financial Assistance
- Policy No. PFS002 - Special Entitlement Advocacy Program
- Policy No. PFS057 - Collection Agencies Performance Standards
- Policy No. PFS061 - Criminal Injuries Compensation Board
- Policy No. PASADT006 - Epic Security Access to Enterprise Payment Functions
- Policy No. FIN154 - Credit Card Payment Processing
- Policy No. FIN137 - Payment Card Industry (PCI) Standards Compliance

Johns Hopkins Community Physicians (JHCP) Cash Collections Reference Manual

Fair Debt Collection Practices Act

Fair Credit Billing Act

Regulation Z — Truth in Lending Act

11 U.S.C.101.et.seq

Maryland Code Criminal Procedure Article §11-809


Maryland Code Commercial Law Article §16-601, et seq

Maryland Code Estates and Trusts Article §8-101, et seq

Maryland Code Health General Article §19-214, et seq

Maryland Code Health General Article §19-214.1

Code of Maryland Regulations COMAR 10.37.10.26 A-1

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IX. REVIEW CYCLE

Two (2) years

X. SPONSOR

- V.P. Revenue Cycle Management, JHHS
- CFO (Johns Hopkins Care at Home (JHC))

XI. APPROVAL

Electronic Signature(s)	Date
Richard Redett Professor	10/08/2025
Cheryl Sadro SVP, CFO JHM	10/14/2025