

# LAC+USC MEDICAL CENTER POLICY

Subject: <b>PATIENT FINANCIAL RESPONSIBILITIES</b>	Original Issue Date: 7/11/75	Policy # <b>207</b>
	Supersedes: 2/13/18	Effective Date: 7/23/21
Departments Consulted: Office of Risk Management Finance Management Patient Financial Services Patient Access Center Ethics, Rights, & Responsibilities Committee	Reviewed & Approved by: Attending Staff Association Executive Committee Senior Executive Council	Approved by:  (Signature on File) Chief Medical Officer  (Signature on File) Chief Executive Officer

## PURPOSE

To ensure that all LAC+USC Medical Center patients, or their responsible representative are advised of their financial responsibilities for medical services provided, and if applicable, available financial assistance programs and/or the billing process.

## POLICY

The Medical Center shall conduct financial screening of all patients treated in its facilities. Before receiving non-emergency medical services, each patient must provide timely identity and address verification, third-party coverage information and financial information to determine program eligibility or make payment arrangements in accordance with the County of Los Angeles Department of Health Services' (DHS) applicable policies.

**Note:** In compliance with the Emergency Medical Treatment and Active Labor Act (EMTALA) regulations, patients presenting in the Emergency Room shall be medically assessed and stabilized before being informed of financial responsibility and/or asked to make payment arrangements.

## PROCEDURE

- The financial screening process shall include, if applicable, distribution of information describing available financial assistance programs.
- Patients shall be given, if applicable, materials explaining their obligation to provide insurance information, authorizing release of medical information to insurers, and/or authorizing insurance payments directly to the LAC+USC Medical Center.
- Patients shall be directed to Patient Financial Services, ,
- who will assist them in applying/accessing financial programs to help disposition of his or her account balance(s).
- Patients shall be informed that they may examine and receive an explanation of their respective bills regardless of payment source and shall be directed to the proper staff for assistance.

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**RESPONSIBILITY**

Patient Access Center

**PROCEDURE DOCUMENTATION**

Patient Access Registration and Financial Screening Reference Guide  
Consolidated Business Office Operations Manual

**REFERENCES**

Federal Registry 466.78(b)(3), Section 9305(b)  
42 United States Code (USC), Section 1395dd(c)(1)(A)(I); also known as  
Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), Section 9121; also  
known as Social Security Act, Section 1867(a); also known as  
Emergency Medical Treatment and Active Labor Act (EMTALA)  
California Code of Regulations, Title 22, Section 70707  
Welfare and Institutions Code 17000  
DHS Policies #s 322, Patients' Bill of Rights; 516, Non-Emergency Treatment Requirements; and  
516.1, Non-Emergency Medical Care Services Requirements- Out-Of-County and Out-of  
Country/Foreign Visitor and Non-Immigrant Persons (FV/NP)  
Joint Commission Standards (Ethics, Rights, and Responsibilities)

**REVISION DATES**

April 1, 1995; October 20, 1998; April 16, 2002; February 22, 2005; October 6, 2008;  
March 10, 2015, February 13, 2018; July 23, 2021