VALLEYCARE OLIVE VIEW-UCLA MEDICAL CENTER/HEALTH CENTERS INPATIENT FINANCIAL SERVICES POLICY & PROCEDURE

NUMBER: 2178 VERSION: 1

SUBJECT/TITLE: ASSIGNMENTS FOR PATIENTS WITH INSURANCE AND MEDI-CAL LINKAGE; AKA "DUAL ASSIGNMENTS"

POLICY:

- PURPOSE: To ensure patients' medical insurance is verified in a timely manner, and that the patients with Medi-Cal linkage are interviewed for Medi-Cal prior to discharge.
- DEPARTMENTS: INPATIENT FINANCIAL SERVICES

DEFINITIONS:

PROCEDURE:

RESPONSIBILITY ACTION

LEADER/MEDS CLERK

(1) Retrieve hospital folders from Admitting three times daily at 7:30 A.M., 11:30 A.M., and 3:30 P.M.

Note: 7:30 A.M. pickup – LEADER/MEDS Clerk; 11:30 A.M. & 3:30 pickups – Unit Clerks as needed.

(2) Prioritize folders with insurance stickers, date stamp, and immediately clear on LEADER/MEDS per existing procedures. Forward to Unit Clerk for assignment.

UNIT CLERK (1) Receive insurance folders, and immediately assign to the designated "Insurance" Patient Resource Worker (PRW) per existing assignment procedure (see Policy & Procedure #2156, formerly #106).

PRW

- (1) Receive assignment and verify insurance per existing procedure.
 - (2) Complete HS-12 "Assignment of Insurance Benefits", and forward original to Billing Review Clerk for processing to Patients Accounts for billing.

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PRW			
(Continued)	(3)	 Upon completion of insurance verification and notification process, review for Medi-Cal linkage. A. Transfer folders with Medi-Cal linkage to Unit Clerk for assignment to Intake PFSW via supervisor, prior to patient's discharge. B. For patients without Medi-Cal linkage, complete billing process per existing procedures. 	
UNIT CLERK	(1)	Receive insurance hospital folders with Medi-Cal linkage, and assign to Intake PFSW per existing procedures, giving "In-House" transfers immediate priority.	
	(2)	Update CTS indicating that case file location is now with the PFSW.	
INTAKE PFSW	(1)	Receive assignment and proceed to interview the patient for Medi-Cal, and initiate an application as appropriate. Document all activity on the Chronological Log (Chron), and transfer case to the Verification Unit via the S/PFSW I, per existing procedure.	
	(2)	If Medi-Cal application is not taken due to no linkage or eligibility, document activity on Chron, and transfer folder back to the Insurance PRW for final billing.	
INTAKE. VERIFICATION. OR CONVERSION PFSW			

INTAKE, VERIFICATION, OR CONVERSION PFSW

PRW

- (1) If previously undisclosed insurance coverage is discovered, complete the following:
 - A. Complete HS-12, and obtain copy of insurance card if available.
 - B. Document activity and "dual assignment" on Chron, and retain a copy of the Chron and the Facesheet. <u>Immediately</u> transfer the hospital folder to the Insurance PRW for follow-up.
- (1) Upon receipt of "dual assignment", follow existing procedures per above. Upon completion of insurance verification procedures, transfer folder back to the current PFSW.

References:			
Approved by: Katherine Salcido (Assistant Hospital Administrator III)	Date: 12/27/2010		
Review Date: 12/27/2013	Revision Date: 11-18-10		
Distribution: Inpatient Financial Services			
Original Date: 12/27/2010			