

# Wichita Falls Endoscopy Center

## Refund Policy

### 1.0 PURPOSE:

To provide Billing/Collections personnel with written detailed policy information for accurately processing Credit Balances in AR and Bad Debt.

### 2.0 DEFINITION OF POLICY:

To establish detailed policy information for Business Office personnel when processing accounts with Credit Balances. The following will be utilized by Financial Specialist to appropriately process credit balances and credit balances for accounts in bad debt.

### 3.0 POLICY INFORMATION:

3.1 Refunds (credit balances) must be completed on a weekly basis; exceptions must be noted and approved by Assistant Administrator or Administrator.

3.2 When a refund is issued, the account it pertains to will be noted for the refund amount and date of refund. In addition, supporting documentation for the reason for the refund and a copy of a letter to the patient or insurance company must accompany the check and the check request prior to the Administrator's signature on the check being issued for the refund.

3.3 No refund check will be issued without supporting documentation of the refund. Examples of documentation can be; Explanation of Benefits, copies of payments, and or screen prints of patient accounts.

3.4 The following transactions should not be posted to an account while it is in the bad debt file:

3.4.1 Charges

3.4.2 Refunds

3.5 If a posting needs to be made to an account in the bad debt file, you must note the reason for the exception. An exception is usually in the form of a physician owners request to schedule and post charges to a bad debt patient account, regardless of delinquent status.

3.6 Refunds should never be issued on accounts in Bad debt status, unless money is due to an insurance company for overpayment or duplicate payment.