

SUBJECT: Billing and Collections Policy	Astera Health
DEPARTMENT: Revenue Cycle	
APPROVED BY: Astera Health Board of Directors	EFFECTIVE: 10/1/2024

PURPOSE:

Astera Health (Astera) is committed to improving the health of the communities we serve by providing comprehensive, quality health care in a caring and safe environment. To accomplish this at the lowest possible cost, patient balances need to be paid promptly. Please read the following information regarding Astera’s billing and collection procedures and payment expectations. Note that when we use the term “you,” “your,” or similar terms in this document, we are referring to the patient and/or the person who is responsible for paying for the patient’s health care, as applicable.

Astera will make reasonable collection efforts to identify patients who may be eligible for financial assistance. Collection procedures will be applied consistently and fairly for all patients regardless of insurance status. When making decisions throughout the collection process, Astera is committed to upholding the multiple federal and state laws that preclude discrimination on the basis of race, sex, age, religion, national origin, marital status, sexual orientation, disabilities, military service, or any other classification protected by federal, state, or local laws. All collection procedures will comply with applicable laws and with Astera Health’s mission. For those patients unable to pay all or a portion of their bill, the applicable Financial Assistance Policy will be followed.

POLICY:

1. Insurance

- If you are covered by an insurance plan accepted by Astera, we will bill your insurance plan timely and accurately for the health care services we provide to you based on the insurance information that you provide to us. We accept many insurance plans, but we cannot guarantee that your insurance plan will cover our services. You are responsible for verifying the coverage of your insurance plan and complying with any coverage-related requirements. We will check your insurance eligibility and demographics. If requested, you must present your insurance card and identification information at check-in. If you do not have insurance coverage, we will discuss payment options with you.
- If Astera timely receives from the patient complete and accurate information about the Payer but does not timely submit a claim to the Payer, and the Payer denies the claim based on that untimely filing, the patient will be responsible for only the amount that the patient would be liable to pay had the Payer paid the claim. However, if Astera determines that it either timely filed the claims or was provided inaccurate or incomplete information, then the patient will be held responsible. Liability insurance is not covered by these Insurance Collections provisions.
- If your insurance plan requires a referral for you to receive our health care services, you must get the required referral before you are seen at

our facility. Failure to get a required referral could reduce your insurance benefit or leave you responsible for the total charges.

- If you believe that your bill is not accurate, that a third party should pay the bill, or if you have other concerns about your bill, please contact our business office to discuss the matter. If you notify us of a billing error, or we otherwise determine that there is a billing error, we will review the bill and correct any billing errors found. While the review is being conducted, we will not bill you for the health treatment or services that are the subject of the review for potential billing errors. We may resume billing you for the health treatment and services that were reviewed for potential billing errors only after (a) the review is complete, (b) any billing errors are corrected, and (c) a notice of completed review (as detailed below) is transmitted to you. If, after completing the review and correcting any billing errors, we determine you overpaid us under the bill, we will refund the amount overpaid under the bill within 30 days after completing the review.
- If we determine or receive notice that your bill may contain one or more billing errors, we will notify you within 30 days (1) of the potential billing error; (2) that we will review the bill and correct any billing errors found; and (3) that while the review is being conducted, we will not bill you for any health treatment or service subject to review for potential billing errors. Within 30 days after we complete this review, we will (1) notify you that the review is complete, (2) explain in detail (a) how any identified billing errors were corrected, or (b) if applicable, why we did not modify the bill as requested, and (3) include applicable coding guidelines, references to health records, and other relevant information.

2. Self-Pay

- Astera health provides an estimate for all uninsured patients and select specialties for all patients regardless of insured status. This estimate will provide the patient with an estimated out-of-pocket cost for the service after all known 3rd party payers are billed. Estimates are also available on demand for any patient who requests one, regardless of their insured status and service they are seeking. While Astera health strives to be as accurate as possible with estimates, unexpected services may be provided and could cause additional costs to the patient.
- You are responsible for any amounts not paid by insurance. This includes co-payments, deductibles, non-covered services, and any other amounts not covered by insurance. Co-payments are due at the time of your visit.
- Astera will collect patient self-pay balances in a fair and consistent manner while maintaining confidentiality and patient dignity. Financial assistance will be offered to those patients whose income and assets will not allow full payment of services within a reasonable time.
- We send billing statements to the patient or responsible person monthly following the initial correspondence we receive from your insurance company. After your insurance company has paid or identified its portion of the bill, the remaining balance is your responsibility and should be paid within thirty days (30) of the statement date. If you are unable to pay the amount due by the due date, please contact our business office to set up an acceptable payment plan.

- Patients participating in a health care sharing plan are considered self-pay. Claims are not sent to the health care sharing company and patients are responsible for following their plan's requirements for reimbursement.

3. Collection Agency

- We may use a collection agency or law firm in certain cases where the terms of a payment arrangement or terms of our billing and collection policy have not been met. Collection agency and law firm staff will uphold the confidentiality and individual dignity of each patient. All agencies and law firms will comply with all applicable laws including HIPAA requirements for handling protected health information. If you have not paid the balance due within [120] days of the applicable statement date and have not made acceptable payment arrangements with our business office, or have not complied with agreed upon payment arrangements, we may refer your account to a collection agency or law firm. Your medical debt will not be reported by us to a consumer reporting agency or credit bureau.
- We will not deny medically necessary health treatment or services to you or any member of your family or household because of current or previous outstanding medical debt owed by you or any member of your family or household to us, regardless of whether the health treatment or service may be available from another health care provider. As a condition of providing medically necessary health treatment or services when you or any member of your family or household has current or previous outstanding medical debt to us, we may require you to enroll in a payment plan for the outstanding medical debt owed to us. The payment plan will take into account any information you disclose to us regarding your ability to pay. If you are unable to make all or part of the agreed-upon installment payments under any such payment plan, you must communicate your situation to us and you must pay an amount you can afford. We may seek other legally permitted remedies in the event of your failure to abide by the payment plan terms.
- We review accounts periodically to confirm the status of any debts, and to identify uncollectible and satisfied debts. We will end collection activities once a debt is identified as satisfied or uncollectable, in accordance with our arrangement with the applicable collection agency or law firm. Our business office staff will provide updates regarding the status of your account upon your request.
- When collecting medical debt, we will comply with all applicable requirements of law (which may include the Minnesota Debt Fairness Act, the federal Fair Debt Collection Practices Act, HIPAA, and Minnesota state privacy laws).

4. Legal Action

- Astera may pursue legal action against patients who refuse to pay a bill, and either are not eligible or have not cooperated in the process of making a determination for financial assistance. Legal action and lawsuits are appropriate if the debt is authorized, all known payers have been billed, Astera has offered the patient a reasonable payment plan, and the patient has been given a reasonable opportunity to apply for financial assistance.

5. Extraordinary Collection Actions

- Extraordinary Collection Actions (ECAs) are list of collection activities, as defined by the IRS and Treasury, that healthcare organizations may only take against an individual to obtain payment for care after reasonable efforts have been made to determine whether the individual is eligible for financial

assistance. Prior to engaging in ECAs, Astera will identify whether reasonable efforts were made to determine whether an individual is eligible for financial assistance.

- Astera, or Astera's authorized collection agencies or law firms, may take action to obtain payment of a medical bill that include the following, but not limited to, that require legal processes:
 - commencing a civil action or lawsuit against the patient or responsible individual;
 - garnishing an individual's wages after securing a court judgment;
 - attaching or seizing an individual's bank account, other personal property, or other judgment enforcement action permissible under state law after securing a judgment;
 - placing a lien on an individual's property after securing a judgment provided that placing a lien against an individual's personal injury recovery, settlement, compromise, or judgment is not considered an extraordinary collection action (ECA).
- Placing a patient's account with a collection agency is not an extraordinary collection action.
- ECAs for hospital services will not commence for a period of 120 days after the date of the first post-discharge billing statement for the applicable medically necessary or emergency medical care.

6. Financial Assistance

- Please refer to Astera's financial assistance policy located on our website.
- Astera will notify individuals of financial assistance availability to eligible individuals at least 30 days prior engaging in ECAs to obtain payment for services provided at Astera by doing the following:
 - Provide written notice to the individual indicating that financial assistance is available to eligible individuals, indicating that Astera intends to initiate or have a third party initiate to obtain payment for the care, and provides a deadline after which ECAs may be pursued and which is no later than 30 days after the date of this written notice;
 - Provide the individual a Plain Language Summary of the Financial Assistance Policy with this written notice; and
 - Make reasonable efforts to orally notify individuals about Astera's financial assistance policy.

7. Customer Service

- Any questions related to statements, billing, payments, financial assistance programs, or estimated procedure pricing can be directed to the Patient Financial Advocates at 218-631-7498 or 1-800-631-1811 ext. 7498. If a Representative is not immediately available, a voicemail message can be left and will be returned promptly.