

# BAPTIST HEALTHCARE SYSTEM

CATEGORY	Effective Date	REVISED
Compliance	Sept 8, 1999	
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## SYSTEM POLICY AND PROCEDURES

**SUBJECT:** Protocol for Credit Balances

**STANDARD(S) OF CONDUCT:** The business of BHS will be conducted according to all applicable laws.

**SCOPE:** This policy applies to employees of the Patient Accounting Departments of the Baptist Healthcare System whose jobs require timely and accurate reporting of Medicare program credit balances.

**AUTHORIZATION:** Directors of Patient Accounting at all Baptist Healthcare System facilities are responsible for the administration of the policy.

### PURPOSE / COMPLIANCE OBJECTIVE

The purpose of this policy is to implement procedures to provide for the timely and accurate reporting of Medicare program credit balances.

### PROTOCOL PROCEDURE

1. Manager and supervisors keep up to date on Medicare regulations regarding the credit balance listing as required under the authority of section 1815 (a), 1883 (E), 1886 (A) (1) (C), and related provisions of the social security act transmittal #663.
2. All providers are required to report credit balances to the fiscal intermediary quarterly on each provider number.
3. Reports are due 30 days after the close of each calendar quarter by diskette.
4. For quarters with no credit balance to report, a provider must send the signed certificate page with "No Credit Balance" written on the bottom of the page.
5. The appropriate person signs and dates the credit balance report certification quarterly.

6. Refund procedures are written as a guide to the refund clerk.
7. 15 accounts on the Medicare credit balance report #CCR060B will be monitored quarterly.

<b>MONITORING TOOLS</b>
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1. ATB's by Financial Class
2. Credit Balance Report #CCR060B.
3. Monitoring results will be given to the compliance officer of each hospital and Executive Director of Patient Financial Services.

Approved:

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Donald R. Riggs  
BHS Compliance Officer

Date: \_\_\_\_\_