 <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p> <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p>	Document Code:	DPOTMH-B-7-P01-S07
	Effective Date:	08-30-2022
	Document Type:	Standard Operating Procedure
	Page Number:	1 of 2
	Department/Section:	Billing
	Document Title:	REQUEST FOR ADDITIONAL DEPOSIT (CASH PATIENTS)

PURPOSE:

1. To ensure that the patient can continuously avail of hospital services.
2. To increase cash flow.

SCOPE:

Applies to all Billing Section Staff and Admitting Staff of Dr. Pablo O. Torre Memorial Hospital (DPOTMH)

PERSON RESPONSIBLE:


Billing Staff, Billing Supervisor and Chief Risk Manager

GENERAL GUIDELINES:

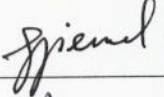
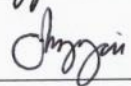
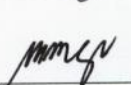

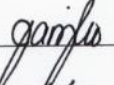

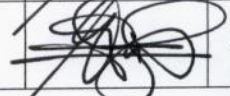
1. Progressive billing shall be done and patients are encouraged to pay in cash.
2. All accounts shall be monitored and corresponding deposits should be made.
3. The Billing Staff is in charge of requesting additional deposits from clients.
4. The Billing Staff calls, email and texts to request deposit to the patient or his/her representative.


PROCEDURE:

1. The Billing Staff prepares the Request for Deposit Slip.
2. The Billing Staff gives the Request for Deposit Slip to the patient's representative.
3. The patient's representative makes an arrangement for payment with the Billing Staff.
4. If no arrangement or payment is made, the Billing Staff puts the patient's account on prescribed status.
5. If payment has been received, the Billing Staff notifies the Nurse-on-Duty that the patient's account has been re-opened.


 <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p>	<p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p>	Document Code:	DPOTMH-B-7-P01-S07
		Effective Date:	08-30-2022
		Document Type:	Standard Operating Procedure
		Page Number:	2 of 2
		Department/Section:	Billing
		Document Title:	REQUEST FOR ADDITIONAL DEPOSIT (CASH PATIENTS)

APPROVAL:

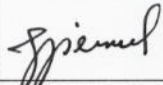
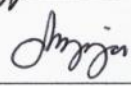




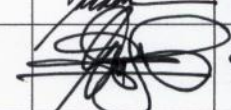
	Name/Title	Signature	Date
Prepared by:	GLOREGENE J. SERUELO Billing Supervisor		8/23/22
Verified:	MA. VICTORIA J. VARGAS Chief Risk Manager		8/23/22
	MARIE MARGARET G. VALLADOLID, CPA, MBA Treasury Officer		08/31/2022
Reviewed:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua Quality Assurance Supervisor		09/09/2022
Recommending Approval:	JULIE ANNE CHRISTINE J. KO, CPA, MBA, FPCHA Chief Finance Officer		9/9/2022
	SOCORRO VICTORIA L. DE LEON, CPA, MBA, PhD, FPCHA Vice President, Chief Operating Officer		9/9/2022
Approved:	GENESIS GOLDI D. GOLINGAN President and CEO		9/9/22

 <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p> <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p>	Document Code:	DPOTMH-B-7-P01-WI07
	Effective Date:	08-30-2022
	Document Type:	Work Instruction
	Page Number:	1 of 2
	Department/Section:	Billing
	Document Title:	REQUEST FOR ADDITIONAL DEPOSIT (CASH PATIENTS)

KEY TASKS	PERSON RESPONSIBLE
1. Prepares the Request for Deposit.	Billing Staff
2. Gives the Request for Deposit Slip to the patient's representative.	
3. Makes an arrangement for payment with the Billing Staff.	Patient's representative
4. Notifies the Nurse-on-Duty that the patient's account has been re-opened.	Billing Staff

 <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p> <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p>	Document Code:	DPOTMH-B-7-P01-WI07
	Effective Date:	08-30-2022
	Document Type:	Work Instruction
	Page Number:	2 of 2
	Department/Section:	Billing
	Document Title:	REQUEST FOR ADDITIONAL DEPOSIT (CASH PATIENTS)

APPROVAL:

	Name/Title	Signature	Date
Prepared by:	GLOREGENE J. SERUELO Billing Supervisor		8/23/22
Verified:	MA. VICTORIA J. VARGAS Chief Risk Manager		8/23/22
	MARIE MARGARET G. VALLADOLID, CPA, MBA Treasury Officer		8/31/2022
Reviewed:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua Quality Assurance Supervisor		09/04/2022
Recommending Approval:	JULIE ANNE CHRISTINE J. KO, CPA, MBA, FPCHA Chief Finance Officer		9/9/2022
	SOCORRO VICTORIA L. DE LEON, CPA, MBA, PhD, FPCHA Vice President, Chief Operating Officer		9/9/2022
Approved:	GENESIS GOLDI D. GOLINGAN President and CEO		9/9/22

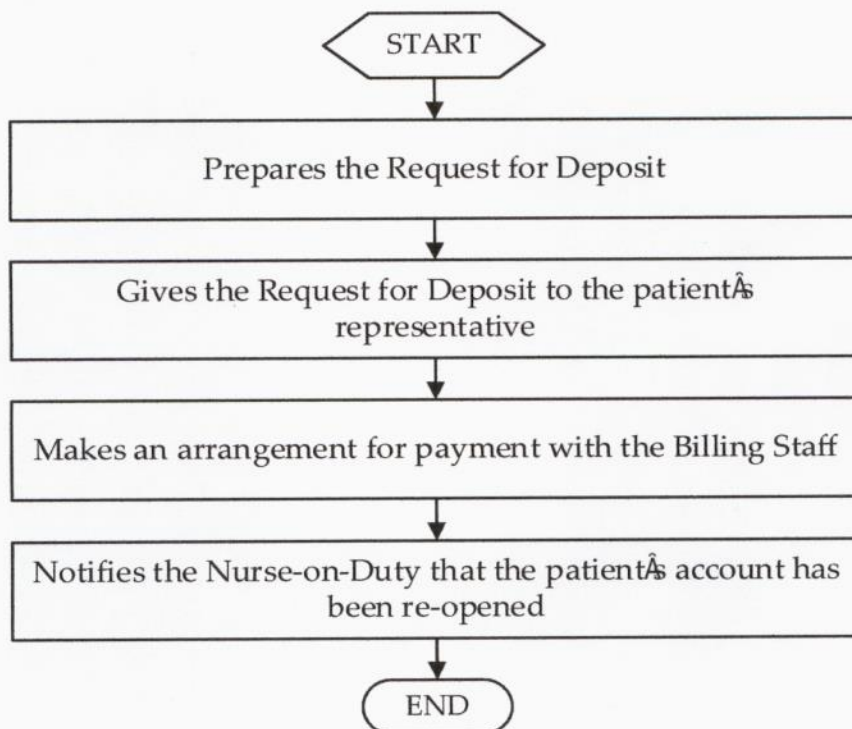



DR. PABLO O. TORRE
MEMORIAL HOSPITAL

B.S. Aquino Drive,
Bacolod City,
Negros Occidental,
6100

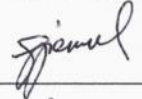
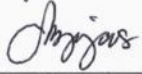


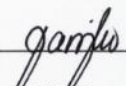
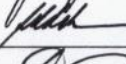
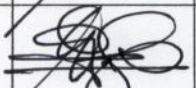
Document Code:	DPOTMH-B-7-P01-FC07
Effective Date:	08-30-2022
Document Type:	Flowchart
Page Number:	1 of 2
Department/Section:	Billing
Document Title:	REQUEST FOR ADDITIONAL DEPOSIT (CASH PATIENTS)

FLOWCHART



 <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p> <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p>	Document Code:	DPOTMH-B-7-P01-FC07
	Effective Date:	08-30-2022
	Document Type:	Flowchart
	Page Number:	2 of 2
	Department/Section:	Billing
	Document Title:	REQUEST FOR ADDITIONAL DEPOSIT (CASH PATIENTS)

APPROVAL:

	Name/Title	Signature	Date
Prepared by:	GLOREGENE J. SERUELO Billing Supervisor		8/22/22
Verified:	MA. VICTORIA J. VARGAS Chief Risk Manager		8/27/22
	MARIE MARGARET G. VALLADOLID, CPA, MBA Treasury Officer		08/31/2022
Reviewed:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua Quality Assurance Supervisor		09/05/2022
Recommending Approval:	JULIE ANNE CHRISTINE J. KO, CPA, MBA, FPCHA Chief Finance Officer		9/9/2022
	SOCORRO VICTORIA L. DE LEON, CPA, MBA, PhD, FPCHA Vice President, Chief Operating Officer		9/9/2022
Approved:	GENESIS GOLDI D. GOLINGAN President and CEO		9/9/22