

Document Code:	DPOTMH-B-7-P02
Effective Date:	08-30-2022
Document Type:	Policy
Page Number:	1 of 5
Department/Section:	Billing
Document Title:	CREDIT LIMIT APPROVAL FOR PERSONAL ACCOUNTS

PURPOSE:

- To establish credit policies for credit extension and approval of personal accounts during the patient's confinement.
- 2. To identify the approving authority of designated personnel and officers.
- 3. To ensure that credit policies are strictly implemented.
- 4. To minimize bad debts.

LEVEL:

Billing Staff, Billing Supervisor, Admitting Staff, Chief Risk Manager

DEFINITION OF TERMS:

 PERSONAL/INDIVIDUAL ACCOUNTS – These are accounts granted to individuals who do not have pre-approved credit lines.

POLICY:

- 1 All individual or personal patients make a deposit or advance payment on admission based on case type and room accommodation and settle their hospital and doctors' bills upon discharge, except in the following cases:
 - 1.1 Emergency It is the condition or state of a patient wherein, based on the objective findings of a prudent Medical Officer on Duty for the day, there is immediate danger and where delay in initial support and treatment may cause loss of life or cause permanent disability to the patient.

Example: vehicular accident cases, gunshot wounds, stab wounds Reference: Republic Act 8344, Section 2.1 – It is an act prohibiting the demand for deposits or advance payments for the confinement of patients in hospitals or medical clinics in certain cases.



Document Code:	DPOTMH-B-7-P02	
Effective Date:	08-30-2022	
Document Type:	Policy	
Page Number:	2 of 5	
Department/Section:	Billing	
Document Title:	CREDIT LIMIT APPROVAL FOR PERSONAL ACCOUNTS	

- 1.2 Serious It refers to the condition of a patient characterized by gravity or danger, which, based on the objective findings of a prudent Medical Officer on Duty for the day, when left unattended to, can cause permanent disability or damage to the patient.
- 1.3 Transferred—Out It refers to patients who have been stabilized after emergency treatment has been administered, after STAT operations, or patients hooked up to life-saving devices but are financially incapable of their hospital and doctor's bills. These cases are usually coordinated with the Attending Physicians and the Billing Section.

Example: vehicular accidents, new-born premature babies or adult patients hooked up to a ventilator for a longer period of time.

Reference: Republic Act 8344, Section 3. After the hospital or medical clinic shall have administered medical treatment and support, it may cause the transfer of the patient to an appropriate hospital consistent with the needs of the patient, preferably to a government hospital, especially in the case of poor or indigent patients.

- 1.4 Patients who have discharge orders but lack the financial means to pay them exercise their right under RA 9439.
- 1.5 Death In the case of a deceased patient, the corresponding death certificate and other documents required for the internment and other purposes shall be released to any of his surviving relatives requesting the same.



Document Title:	CREDIT LIMIT APPROVAL FOR PERSONAL ACCOUNTS	
Department/Section:	Billing	
Page Number:	3 of 5	
Document Type:	Policy	
Effective Date:	08-30-2022	
Document Code:	DPOTMH-B-7-P02	

- 2 Deposit or Partial Payment Policy. On admission, patients with personal accounts are required to make a deposit depending on case type, i.e. medical, surgical, OB or Gyne or others and according to room accommodation.
- 3 Progress Billing Plan. While the patient is confined, the designated Billing Staff follows-up the additional deposit once the initial deposit is consumed, until the patient is discharged.

4 Credit Limit Approval

- 4.1 Admitted Patients
- 4.1.1 The Credit Limit Approval of the Billing Account Officer is a maximum amount of P30,000.00. Accounts over P30,000.00 should be referred to the Billing Section Supervisor for proper disposition.
- 4.1.2 The Credit Limit Approval of the Billing Section Head and the Chief Risk Manager is a maximum amount of P100,000.00.
- 4.1.3 The Billing Supervisor confers with the Chief Risk Manager the accounts referred by the Billing Staff.
- 4.2 Patients for Discharge
- 4.2.1 The Billing Staff refers all accounts for Promissory Note Approval to the Billing Supervisor or the Chief Risk Manager.
- 4.2.2 Promissory Note Accounts up to P100,000 are approved by the Billing Supervisor or the Chief Risk Manager.
- 4.2.3 Promissory Notes over P100,000.00 should be subject to Top Management's approval.

5 Credit Terms

- 5.1 The maximum payment term is 30 days.
- 5.2 An interest fee of 3% per month is charged after 30 days.



Document Code:	DPOTMH-B-7-P02	
Effective Date:	08-30-2022	
Document Type:	Policy	
Page Number:	4 of 5	
Department/Section:	Billing	
Document Title:	CREDIT LIMIT APPROVAL FOR PERSONAL ACCOUNTS	

- 6 Requirements to be submitted by the patient for Personal Account are the following:
 - 6.1 Sign the standard DPOTMH promissory note
 - 6.2 At least two (2) co-makers who are gainfully employed.
 - 6.3 In case of a married co-maker, the spouse's signature as marital consent
 - 6.4 At least two (2) valid identification cards
 - 6.5 Proof of Billing (Utility Bills)
- 7 Submission of collateral, preferably a Land Title, is necessary if complete payment cannot be made. A Real Estate Mortgage is executed and the terms are annotated on the title.
- 8 The client is required to issue postdated check/s for his account balance.

DOCUMENTATION:

Revised Policy

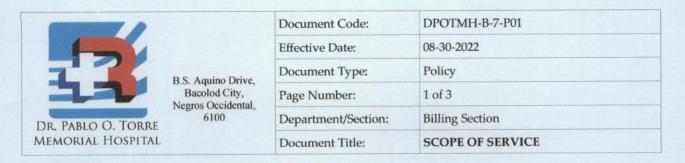
DISSEMINATION:

Hospital Communicator



Document Code:	DPOTMH-B-7-P02	
Effective Date:	08-30-2022	
Document Type:	Policy	
Page Number:	5 of 5	
Department/Section:	Billing	
Document Title: CREDIT LIMIT APPROVAL F PERSONAL ACCOUNTS		

	Name/Title	Signature	Date
Prepared by:	GLOREGENE J. SERUELO	gionel	0/22/32
	Billing Supervisor	The state of	0(0-1)-
	MA. VICTORIA C. VARGAS	Amaia	8/23/27
Verified:	Chief Risk Manager	Current	-//
	MARIE MARGARET G. VALLADOLID, CPA, MBA	A STATE OF THE STA	0-1 10-0
	Treasury Officer	Munch	08/31/2022
Reviewed:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua	0	09/09/2022
	Quality Assurance Supervisor		
	JULIE ANNE CHRISTINE J. KO, CPA, MBA, FPCHA	,	
Recommending	Chief Finance Officer	gantu	9/9/2022
Approval:	SOCORRO VICTORIA L. DE LEON, CPA, MBA,		
	PhD, FPCHA	Uleh	9/1/2022
	Vice President, Chief Operating Officer	1	
Approved:	GENESIS GOLDI D. GOLINGAN	State	9/0/20
	President and CEO	100	- 44/5



PURPOSE:

To provide information on the services being offered by the Billing Section.

LEVEL:

Billing Supervisor, Billing Staff, Billing Clerk, Chief Risk Manager

SCOPE OF SERVICE:

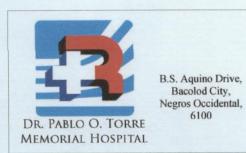
The Billing Section of Dr. Pablo O. Torre Memorial Hospital is assigned with the preparation and consolidation of each patient's individual statement of account after all procedures, medicines, supplies, and other support services are billed accordingly. The patient accounts catered by the section include those which are company-sponsored, enrollees and dependent on affiliated Health Maintenance Organizations (HMO's), Insurance Companies, corporate or institutional clients.

The Billing Section also ensures that all mandated social legislation like coverage by the Philippine Health Insurance (PhilHealth), discounts for Senior Citizens, Person with Disability (PWD) and other similar socialized benefits are applied according to the respective implementing rules and regulations set by the government.

The Billing Section is open from 8am to 7pm, 7 days a week, including holidays. After 6pm, all transactions will be forwarded to the Admitting Section. An estimated bill shall be available to the client upon request.

Processing of PhilHealth, Senior Citizen/ Person with Disability (PWD) benefit

- Members who wish to avail of the PhilHealth benefit shall present the Member Data Record and valid government identification cards.
- Requirements shall be submitted on or before the date of discharge to avail of the benefits.



Document Code:	DPOTMH-B-7-P01
Effective Date:	08-30-2022
Document Type:	Policy
Page Number:	2 of 3
Department/Section:	Billing Section
Document Title:	SCOPE OF SERVICE

3. A Copy of Senior Citizen/PWD ID shall be submitted or other pertinent document may be presented in availing of the discount.

Billing of Inpatients

The cut-off time for discharge is 11:00 A.M. Patients with Discharge Order on or before 11:00 A.M. are billed as a half day.

Health Maintenance Organization (HMO), Company Sponsored

- Patients who don't have an identity card or letter of Authority (LOA) presented upon admission but claims to be a member of an accredited HMO or Company Sponsored beneficiary, shall be considered ordinary patients temporarily until the desired documents have been submitted.
- Admitted patients who cannot present a card nor submit a member/beneficiary of an HMO or Company Sponsored card and LOA, shall be considered within the system provided the specified documents are submitted and presented to Billing Section within 48 hours following submission.

Location:

The section is located on the ground floor of the Main Hospital Building.

Staffing and Direction:

The Billing Section provides manpower coverage for the unit from 8am to 7pm a day including weekends and holidays. Every staff member works 8 hours per shift with days off.



Document Code:	DPOTMH-B-7-P01
Effective Date:	08-30-2022
Document Type:	Policy
Page Number:	3 of 3
Department/Section:	Billing Section
Document Title:	SCOPE OF SERVICE

	Name/Title	Signature	Date
Prepared by:	GLOREGENE J. SERUELO	. 0	11
	Billing Supervisor	grend	8/23/27
	MA. VICTORIA J. VARGAS	W _Q	8/23/22
V:C-1.	Chief Risk Manager	Outracker	8/27/27
Verified:	MARIE MARGARET G. VALLADOLID, CPA, MBA		,,
	Treasury Officer	mmgr	09/02/202
Reviewed:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua	0	09/09/2022
	Quality Assurance Supervisor		11011002
	JULIE ANNE CHRISTINE J. KO, CPA, MBA, FPCHA	State of the state	
Recommending	Chief Finance Officer	gamly	9/9/2022
Approval:	SOCORRO VICTORIA L. DE LEON, CPA, MBA, PhD, FPCHA	1	
	Vice President, Chief Operating Officer	Mil	9/1/1022
Approved:	GENESIS GOLDI D. GOLINGAN	400	-/-/
	President and CEO	18	7/9/22



Document Code:	DPOTMH-B-7-P05	
Effective Date:	08-30-2022	
Document Type:	Policy	
Page Number:	1 of 4	
Department/Section:	Billing	
Document Title:	SUBMISSION OF PROFESSIONAL FEES FOR INCLUSION IN PATIENT'S BILL	

PURPOSE:

- 1. To establish a standard procedure in the submission of Professional Fees for inclusion in patient's hospital bill.
- To expedite the turn-around time of the processing of patient's bills within one (1)
 hour from the time the patient is ordered as May Go Home by the Attending
 Physician/s.

LEVEL:

Attending Physician, Admitting Clerk, Nurse-on-Duty, Billing Clerk/Billing Staff, EDP Clerk, Billing Supervisor and Cashier

DEFINITION OF TERMS:

- 1. **Professional/Medical Fees -** These are fees charged for services rendered by doctors to patients.
- Patient's Hospital Bill or Statement of Account This is a document issued by the hospital showing the details of charges and payment for services rendered to the patient.
- 3. Hospital Bill Processing Sheet It is a document prepared by the nurse showing the Discharge Order, Name of Doctor(s) with their corresponding Professional Fees, Diagnosis, Operation if any, and returnable items. This form is the basis of billing in processing the Patient's Hospital Bill.
- 4. Professional Fees Tariff Rate List It is a list of fixed Professional Fees provided by the corresponding Medical Department/s as the basis of their Professional Fees for In-Patients in case they cannot give their Professional Fees within thirty (30) minutes.



Document Code:	DPOTMH-B-7-P05	
Effective Date:	08-30-2022	
Document Type:	Policy	
Page Number:	2 of 4	
Department/Section:	Billing	
Document Title:	SUBMISSION OF PROFESSIONAL FEES FOR INCLUSION IN PATIENT'S BILL	

POLICY:

- 1 Consultants who opt to include their Professional Fees in the Patient's Hospital Bill/Statement of Account shall indicate their Professional Fees on the Processing Sheet included in the patient's chart upon writing their discharge order.
- 2 The Nurse on- Duty verifies the amount indicated by the Consultant/s. If no Professional Fee is indicated, Nurse on Duty shall call the Consultant.
- 3 The Nurse on -Duty encodes the instruction in the Processing Sheet to Bizbox and tags the patient "May go Home".
- 4 The EDP Clerk prints the Processing Sheet and checks the completeness of data that is included and endorses it to the Billing Clerk for completion of information needed.
- 5 If no Professional Fees are indicated, the Billing Clerk calls the Consultant/s to verify or ask for Professional Fees. Consultants should give their Professional Fees within **thirty (30) minutes**, otherwise, Professional Fees will not be included in the Patient's Bill.
- 6 If the Consultant will not call Billing within thirty (30) minutes, the Billing will base the Professional Fees in the Professional Fee Tariff submitted by the respective Departments.
- 7 For Consultants/Departments without Professional Fee Tariff, the Professional Fees will not be included in the Patient's Bill.
- 8 Once the Hospital Bill is generated and verified, a copy is given to the patient to settle the Hospital Bill and the Consultant's Professional Fees at the Cashier so that a clearance will be issued.



Document Code:	DPOTMH-B-7-P05	
Effective Date:	08-30-2022	
Document Type:	Policy	
Page Number:	3 of 4	
Department/Section:	Billing	
Document Title:	SUBMISSION OF PROFESSIONAL FEES FOR INCLUSION IN PATIENT'S BILL	

- 8.1 For patients whose doctors did not give their Professional Fees within the prescribed time (within 30 minutes), the Billing Staff advises the patient to settle their Professional Fees directly with the Consultants.
- 9 The Professional Fees that are collected are deposited in the Consultant's Depository Bank within five (5) working days.

DOCUMENTATION:

Revised Policy

DISSEMINATION:

Hospital Communicator



Document Code:	DPOTMH-B-7-P05
Effective Date:	08-30-2022
Document Type:	Policy
Page Number:	4 of 4
Department/Section:	Billing
Document Title:	SUBMISSION OF PROFESSIONAL FEES FOR INCLUSION IN PATIENT'S BILL

	Name/Title	Signature	Date
Prepared by:	GLOREGENE J. SERUELO	. 0	1.1.
	Billing Supervisor	Spend	8/23/2
	MA. VICTORIA J. VARGAS	10	-1 /-
Verified:	Chief Risk Manager	alreally	8/27/27
vermeu.	MARIE MARGARET G. VALLADOLID, CPA, MBA		
	Treasury Officer	Much	08/31/2020
Reviewed:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua	0	09/09/2022
	Quality Assurance Supervisor		Market
	JULIE ANNE CHRISTINE J. KO, CPA, MBA, FPCHA		
Recommending	Chief Finance Officer	annly	9/9/2000
Approval:	SOCORRO VICTORIA L. DE LEON, CPA, MBA, PhD, FPCHA	July	
	Vice President, Chief Operating Officer	Mich	9/9/2023
Approved:	GENESIS GOLDI D. GOLINGAN	SAN	alala
	President and CEO	908	7/7/22



Document Code:	DPOTMH-B-7-P05-S01
Effective Date:	08-30-2022
Document Type:	Standard Operating Procedure
Page Number:	1 of 3
Department/Section:	Billing
Document Title:	SUBMISSION OF PROFESSIONAL FEES FOR INCLUSION IN PATIENT'S BILL

PURPOSE:

To provide guidelines on the proper implementation of submission of professional fees for inclusion in the patient's bill.

SCOPE:

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

PERSON RESPONSIBLE:

Billing Clerk, Billing Staff, Billing Section Head, Staff Nurse, EDP Clerk & Chief Risk Manager

PROCEDURE:

- On admission, the Admitting Clerk attaches the Processing Sheet to the Admission and Discharge Record and other admission documents.
- Upon May Go Home Advice, the Nurse on-Duty gives the blank Processing Sheet to be filled out by the Attending Physician which includes information such as: discharge date, discharge time, name of Doctor, Professional Fee and signature, and diagnosis.
- The Nurse on Duty fills-out the remaining information in the processing and encodes it to Bizbox. The Nurse on Duty then tags the patient "May Go Home" (yellow).
- 4. The EDP Clerk generates the Processing Sheet and endorses it to the Billing Clerk to verify the completeness of Professional Fees and returnable items.
- 5. The Billing Clerk calls the Consultants if no Professional Fees are indicated. If the Consultant does not respond within 30 minutes, the processing sheet is forwarded to the EDP Section for printing of the final bill without doctor's fees.



Document Title:	SUBMISSION OF PROFESSIONAL FEES FOR INCLUSION IN PATIENT'S BILL
Department/Section:	Billing
Page Number:	2 of 3
Document Type:	Standard Operating Procedure
Effective Date:	08-30-2022
Document Code:	DPOTMH-B-7-P05-S01

- 6. The Billing Staff gives a copy of the final bill to the patient or representative and instructs them to pay the hospital bill and settle the professional fees at the clinic.
- 7. Once the hospital bill is settled, the cashier issues the clearance slip.

DR. PABLO O. TORRE MEMORIAL HOSPITAL	0100	Department/Section: Document Title:	Billing SUBMISSION OF PROFESSIONAL FEES FOR INCLUSION IN PATIENT'S BILL
1	Bacolod City, Negros Occidental, 6100	Page Number:	3 of 3
	B.S. Aquino Drive,	Document Type:	Standard Operating Procedure
		Effective Date:	08-30-2022
		Document Code:	DPOTMH-B-7-P05-S01

	Name/Title	Signature	Date
Prepared by:	GLOREGENE J. SERUELO	Priend	8/22/-
	Billing Supervisor	1	012711
	MA. VICTORIA J. VARGAS	0 -	8/27/22
Verified:	Chief Risk Manager	Opportunity	8121120
vermea.	MARIE MARGARET G. VALLADOLID, CPA, MBA		2-1-1-
	Treasury Officer	Much	08/3/1/2022
Reviewed:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua	2	09/01/202
	Quality Assurance Supervisor		201/01/10
	JULIE ANNE CHRISTINE J. KO, CPA, MBA, FPCHA	202	
Recommending	Chief Finance Officer	annlu	9/9/2022
Approval:	SOCORRO VICTORIA L. DE LEON, CPA, MBA, PhD, FPCHA	1	
	Vice President, Chief Operating Officer	Mach	9/9/2022
Approved:	GENESIS GOLDI D. GOLINGAN		0/1
	President and CEO	TUN	7/9/22



Document Code:	DPOTMH-B-7-P05-WI01
Effective Date:	08-30-2022
Document Type:	Work Instruction
Page Number:	1 of 2
Department/Section:	Billing
Document Title:	SUBMISSION OF PROFESSIONAL FEES FOR INCLUSION IN PATIENT'S BILL

	KEY TASKS	PERSON RESPONSIBLE
1.	Attaches the Processing Sheet to the Admission and Discharge Record and other admission documents on admission.	Admitting Clerk
2.	Gives the blank Processing Sheet to be filled- out by the Attending Physician upon May Go Home Advice.	
3.	Fills-out the remaining information in the processing and encodes it to Bizbox. The Nurse on Duty then tags the patient "May Go Home" (yellow).	Nurse on-Duty
4.	Generates the Processing Sheet and endorses it to the Billing Clerk to verify the completeness of Professional Fees and returnable items.	EDP Clerk
5.	Calls the Consultants if no Professional Fees are indicated.	Billing Clerk
6.	Gives a copy of the final bill to the patient or representative and instructs them to pay the hospital bill and settle the professional fees at the clinic.	Billing Staff
7.	Issues the clearance slip once the hospital bill is settled.	Cashier



Document Code:	DPOTMH-B-7-P05-WI01
Effective Date:	08-30-2022
Document Type:	Work Instruction
Page Number:	2 of 2
Department/Section:	Billing
Document Title:	SUBMISSION OF PROFESSIONAL FEES FOR INCLUSION IN PATIENT'S BILL

	Name/Title	Signature	Date
Prepared by:	GLOREGENE J. SERUELO	0	dnh
	Billing Supervisor	grenny	0/20/2
	MA. VICTORIA J. VARGAS	1 .	8/23/22
Verified:	Chief Risk Manager	Open Som	8/29/00
vermea:	MARIE MARGARET G. VALLADOLID, CPA, MBA		
	Treasury Officer	mmgv	8/31/202
Reviewed:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua	Q	nhlm
	Quality Assurance Supervisor		rifiga
	JULIE ANNE CHRISTINE J. KO, CPA, MBA, FPCHA		
Recommending	Chief Finance Officer	gomlu	9/9/2022
Approval:	SOCORRO VICTORIA L. DE LEON, CPA, MBA, PhD, FPCHA		,,
	Vice President, Chief Operating Officer	Alch	-9/1/202
Approved:	GENESIS GOLDI D. GOLINGAN	/And	alala.
LESSES	President and CEO	74	1/1/2



Document Title:	SUBMISSION OF PROFESSIONAL FEES FOR INCLUSION IN PATIENT'S BILL
Department/Section:	Billing
Page Number:	1 of 2
Document Type:	Flowchart
Effective Date:	08-30-2022
Document Code:	DPOTMH-B-7-P05-FC01

FLOWCHART START Attaches the Processing Sheet to the Admission and Discharge Record and other admission documents on admission Gives the blank Processing Sheet to be filled- out by the Attending Physician upon May Go Home Advice Fills-out the remaining information in the processing and encodes it to Bizbox. The Nurse on Duty then tags the patient "May Go Home" (yellow). Generates the Processing Sheet and endorses it to the Billing Clerk to verify the completeness of Professional Fees and returnable items Calls the Consultants if no Professional Fees are indicated Gives a copy of the final bill to the patient or representative and instructs them to pay the hospital bill and settle the professional fees at the clinic Issues the clearance slip once the hospital bill is settled. **END**



Document Code:	DPOTMH-B-7-P05-FC01
Effective Date:	08-30-2022
Document Type:	Flowchart
Page Number:	2 of 2
Department/Section:	Billing
Document Title:	SUBMISSION OF PROFESSIONAL FEES FOR INCLUSION IN PATIENT'S BILL

	Name/Title	Signature	Date
Prepared by:	GLOREGENE J. SERUELO	1	11
	Billing Supervisor	Spient	8/23/2
Verified:	MA. VICTORIA J. VARGAS	// 0 -	11
	Chief Risk Manager	Marchan	8/23/20
	MARIE MARGARET G. VALLADOLID, CPA, MBA		/ /-
	Treasury Officer	Munch	08/31/2025
Reviewed:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua	0	09/04/00
	Quality Assurance Supervisor		011-110-2
	JULIE ANNE CHRISTINE J. KO, CPA, MBA, FPCHA		
Recommending	Chief Finance Officer	damly	9/9/2022
Approval:	SOCORRO VICTORIA L. DE LEON, CPA, MBA, PhD, FPCHA		
	Vice President, Chief Operating Officer	Illi	9/1/2022
Approved:	GENESIS GOLDI D. GOLINGAN	And S	9/0/
	President and CEO	100	1/7/22