Policy and Procedure

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<tr>
<th>Title:</th>
<th>Cash Fund Policy and Collections Procedure for Clinic Business Office</th>
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<tr>
<td>Policy Number:</td>
<td>2C.01</td>
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<td>Version Number:</td>
<td>4</td>
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<td>Approved By:</td>
<td>Linda McMurry, DNP, RN, NEA-BC, LCCHWC Executive Director</td>
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<td>CHWCCA Board of Directors</td>
<td>Effective Date: 07/19/2022</td>
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<td>Original Date:</td>
<td>07/06/2015</td>
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POLICY | PURPOSE STATEMENT:
The purpose of the policy is to establish a formal process at TTUHSC SON Larry Combest Community Health & Wellness Center clinic sites for maintaining cash fund in accordance with TTUHSC Policy and collection procedures.

SCOPE:
This policy and procedure applies to all TTUHSC SON Larry Combest Community Health & Wellness Center clinic sites; and is distributed to each site.

NOTICE:
In addition to this policy, the Combest adheres to the following institutional operating, policies, and procedures:
1. TTUHSC OP 50.07 Deposit Procedures
2. TTUHSC OP 50.10 Endorsement Stamps and Endorsement Checks
3. TTUHSC OP 50.21 Cash Funds
4. TTUHSC Position Description - SON Combest Center Patient Services Specialist (PSS) Position

DEFINITIONS:

Cash Collections: Include payments to TTUHSC in the form of currency, coins, checks, credit cards, warrants, wire transfers, or other forms of valuable consideration.

Cash Collection Points and Custodians: At each location involved in regular collections of cash is considered a cash collection point and must appoint a cash collection custodian. Cash collection custodians are responsible for establishing and maintaining cash handling procedures, safeguarding cash collections, and communicating cash handling procedures to supporting staff.

Deposit Custodians: Deposit custodians are responsible for ensuring that deposits are
made to the secondary depository (depositories) in a timely manner. Deposit custodians must establish internal controls, maintain comprehensive written procedures for proper cash, and deposit handling (see TTUHSC OP 50.07, Deposit Procedures).

HRSA: Health Resources and Services Administration

FQHC: Federally Qualified Health Center

PROCEDURE:

I. Basic Information
   a. Title of Cash Collection Custodian – Clinic Administrator
      i. In absence of Cash Collection Custodian, the Finance Director will act on their behalf.
   b. Location of Cash Collection Point – Front office check-in and check-out locations.
   c. Sources of Collections – Patient Services Specialists collect co-pays and fees for services during patient registration process
      i. Clinic office collections consist of co-pays and fees collected for Medicare, Medicaid, Commercial insurance, and Sliding Fee Scale.
      ii. Collect cash, checks, and credit cards while maintaining a cash drawer with end of day reconciliations.

II. Receipt Information
   a. Receipts are provided in person to patient at the time payment is issued for cash, check, or credit card.
   b. Receipts are recorded in the computer system and applied to account when payments are received through mail; and statements are sent to reflect the receipt of payment.

III. Departmental PSS (Patient Services Specialist) Cash Drawer management
   a. PSS Must complete TTUHSC Cash Fund Training before a cash drawer is assigned.
   b. PSS responsibilities related to cash collections:
      i. PSS cash drawer must always be locked when not working at your station. Failure to do so will result in disciplinary action.
      ii. Each PSS is responsible for maintaining the cash that is distributed to them daily.
      iii. Each PSS is responsible for following proper collections of money as
Policy and Procedure outlined in TTUHSC OP 50.07 Deposit Procedures

iv. Complete a daily Reconciliation of Cash Receipts.
1. All cash collected must be balanced daily by comparing the total cash on hand to the system batch report or pre-numbered receipt totals at end of month, and/or mail log totals, as applicable.
2. Balancing will ALWAYS occur with your supervisor or designee present.
3. Occurs daily once at the beginning of your shift and at the end of your shift.

v. Cash Drawer Discrepancies (TTUHSC OP 50.21 Cash Funds)
1. All must be reported immediately to your supervisor.
2. All shortages greater than $10 must be reported immediately to Accounting Services via your supervisor. Accounting Services will determine the action necessary to reimburse the account and/or to record the shortage in the financial system.
3. All shortages greater than $100 or losses occurring from known or suspected theft must be reported immediately upon discovery to Audit Services and to the Texas Tech Police Department (in addition to notifying Accounting Services) via your supervisor.
4. Overages must be entered into deposit and a cash receipt must be created into designated account; Custodians must remain cognizant of all overages since they could represent missing receipts.

vi. Void, Errors and Other Adjustments
1. Refunds and/or Deletions are not permitted without supervisor approval.
2. Any errors and other adjustments must be reported to your supervisor during reconciliation as they must be approved and properly documented before the close of the business day.
3. Credit Card adjustments/corrections must be reported to supervisor for assistance and before settlement occurs to properly reconcile before the end of the business day.

IV. FQHC and HRSA Requirement – No patient will be denied health care services due to an individual’s ability to pay for such services by the health center, assuring that any fees or payments required by the center for such services will be reduced or written off.
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a. Financial Agreement – must be offered to patients to assist them in their ability to pay and meeting their financial obligation.
b. Sliding Fee Scale Discounts are offered to those who qualify

V. Segregation of Duties – Is the process for ensuring that the functions of cash collections, deposit preparation, and collection reconciliations are exclusively segregated. (HSC OP 50.21 4(a) Cash Fund Control Plan)

a. Front office collections:
   i. PSS Supervisor or appointed administrator distributes daily cash fund to PSS for cash drawer collection preparation.
   ii. Only PSS staff collects and receipt face-to-face payments issued by patients during the check-in and checkout process.
   iii. PSS Supervisor or appointed administrator assist in the reconciliation of daily cash fund and cash drawer with PSS staff.
   iv. PSS Supervisor or appointed administrator places all PSS collections in the designated safe.

b. Mail Collections
   i. All checks received in the mail are opened, copied, and logged.
   ii. Checks, copies, and logs are given to the Fund Manager/Unit Manager for processing.
   iii. Fund Manager/Unit Manager confirms check receipt using log.

c. Deposit
   i. Fund Manager/Unit Manager records all cash received and matches to daily reconciliation logs and batch control slips.
      1. Voids, errors and/or other adjustments are reviewed during this process by Fund Manager/Unit Manager.
         a. Issues found will be addressed immediately with staff involved and Clinic Administrator(s).
         b. Retraining will occur with staff and Clinic Administrator(s) based on error found as needed.
         c. Any concerns of theft will be reported to Office of Audit Services & Accounting Departing immediately.
   ii. Fund Manager/Unit Manager enters collections into TTUHSC Student Business Services system under Cash Receipts.
   iii. Appointed designee verifies deposit.
   iv. Monies are securely delivered to Student Business Services.
RESPONSIBILITIES | REVIEW | REVISIONS:
It is the annual responsibility of the Finance Manager and Finance Administration at TTUHSC SON Larry Combest Community Health & Wellness Center to initiate and review this policy to comply with HRSA and FQHC requirements. It is the responsibility of the Policy & Procedures Committee to review necessary revisions presented by the Finance Manager and administrative management of this policy.

RIGHT TO CHANGE POLICY:
TTUHSC SON COMBEST reserves the right to interpret, change, modify, amend, or rescind this policy in whole or in part at any time to reflect changes in policy and/or law.