



## REVENUE CYCLE MANAGEMENT POLICY AND PROCEDURE

**TITLE:** PRICE TRANSPARENCY POLICY  
**POLICY NUMBER:**  
**EFFECTIVE DATE:** 12/31/2018  
**DATE REVISED:**  
**REPLACING:**

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### 1.0 PURPOSE

To provide patients with the information they need to understand the total price of their care and what is included in that price.

### 2.0 SCOPE

To offer clear information that is readily accessible to patients and enables them to make meaningful comparisons among providers.

### 3.0 DEFINITIONS

- **CHARGE.** The dollar amount a provider sets for services rendered before negotiating any discounts. The charge can be different from the amount paid.
- **COST.** The definition of cost varies by the party incurring the expense:
  - ▶ To the patient, cost is the amount payable out of pocket for healthcare services.
  - ▶ To the provider, cost is the expense (direct and indirect) incurred to deliver healthcare services to patients.
  - ▶ To the insurer, cost is the amount payable to the provider (or reimbursable to the patient) for services rendered.
  - ▶ To the employer, cost is the expense related to providing health benefits (premiums or claims paid).
- **PRICE.** The total amount a provider expects to be paid by payers and patients for healthcare services.
- **PAYER.** An organization (generally, the insurance company) that negotiates or sets rates for provider services, collects revenue through premium payments, processes provider claims for service, and pays provider claims using collected premium revenues.
- **PROVIDER.** An entity, organization, or individual that furnishes a healthcare service.
- **OUT- OF- POCKET PAYMENT.** The portion of total payment for medical services and treatment for which the patient is responsible, including copayments, coinsurance, and deductibles.
- **PRICE TRANSPARENCY.** In health care, readily available information on the price of healthcare services that, together with other information, helps define the value of those

services and enables patients and other care purchasers to identify, compare, and choose providers that offer the desired level of value.

#### **4.0 POLICY**

It is the policy of St. Tammany Parish Hospital to develop web-based tools that are readily accessible to patients to determine price comparisons prior to receiving care.

#### **5.0 Procedures**

A. Individuals may obtain information regarding the estimated charges of services utilizing the following methods:

- a. **Email:** [financialadvisor@stph.org](mailto:financialadvisor@stph.org)
- b. **Phone:** Financial Advisor 985-898-5656
- c. **Pricing Estimation tool** located on St. Tammany Parish Hospital's website
  - i. Estimate of patient's anticipated out of pocket costs
  - ii. Valid insurance policy information required
- d. **Pricing Transparency tool** located on St. Tammany Parish Hospital's website
  - i. Estimate of total average charges by procedure or service

#### **6.0 External References**

CMS Guidelines: Hospital Price Transparency.

The Affordable Care Act contains a provision that is consistent with our effort to improve the transparency of hospital charges.

*"Hospitals are required to establish and make public a list of their standard charges. In an effort to encourage price transparency by improving public accessibility of charge information, effective CY 2019 CMS updated its guidelines to specifically require hospitals to make public a list of their standard charges via the Internet in a machine readable format, and to update this information at least annually, or more often as appropriate. "*

**We recognize that navigating healthcare estimates and out of pocket costs can be complex. Please do contact the Financial Advisor (details listed above) for additional assistance or clarity.**