

HSA Policy Manual

Section 02 – Financial Management

Policy	Title	Date Last Revised
2.1	Budget Preparation	
	2.1.a – Base Budget Request/ Continuation Budget	March 23, 2011
	2.1.b – Improvement Budget Request	March 23, 2011
2.2	Work Programs	March 23, 2011
2.3	Segregation of Duties	March 23, 2011
2.4	County Closeout	March 23, 2011
2.5	Expansion of Programs	March 23, 2011
2.6	Delinquent Non-Metropolitan Local Appropriation Payments	March 23, 2011
2.7	Accounts Receivable	
	2.7.a – 3rd Party and Individual Patient Billing	March 23, 2011
	2.7.b – Collecting 3rd-Party Deductibles	March 23, 2011
	2.7.c – Collecting 3rd Party Co-payments	March 23, 2011
	2.7.d – Billing for Patients Who Have TennCare and Private Insurance	March 23, 2011
	2.7.e – Patients Requesting Local Health Department Services in lieu of Receiving Services from their Assigned/Network Provider	March 23, 2011
	2.7.f – Collection and Write-off of Accounts Receivables	March 23, 2011
	2.7.g – Claim for Refund	March 23, 2011
	2.7.h – Waiving Private Insurance Billing (Non-TennCare Enrollees)	March 23, 2011
2.8	Supplemental Pay	March 23, 2011
2.9	Depositing Fees	March 23, 2011
2.10	Special Needs	March 23, 2011
2.11	Fund Control	March 23, 2011
2.12	Petty Cash	March 23, 2011
2.13	Documenting and Filing Manual and Accompanying Computer-Generated Receipts	March 23, 2011
2.14	Voiding Deposit Slips (CDs)	March 23, 2011
2.15	Waiving Fees	March 23, 2011