

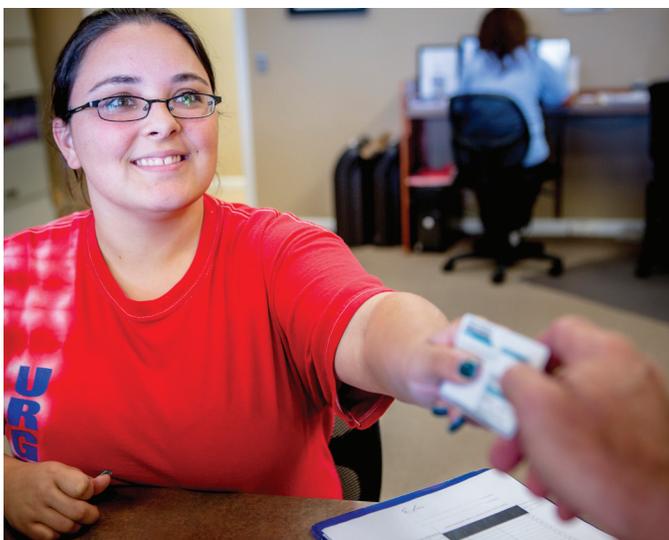


4 ways to improve patient pay

By Betsy Vereckey | August 17, 2016

It happens every day in medical offices large and small: Bills go uncollected. In 2014 alone, \$1.2 billion in patient bills went unpaid nationwide. As deductibles rise and patients take on a larger share of health care costs, that number is expected to increase.

But it's possible to fight the trend – with advance planning, strong communication, and an eye on the data. Here are some tactics top-performing medical organizations have used to drive results:



1) Focus on the front desk

A patient's first contact is the (hopefully) smiling person at the reception desk. Front office workers are also the front line in collections: greeting patients, collecting co-pays, establishing payment plans, exploring outside financing options, and explaining insurance benefits in a way that's personalized and easy to understand.

So some medical offices clearly define objectives, then conduct monthly audits of staff members to assess quality, spot areas of improvement, and recognize top performers.

Georgia-based Peachtree Orthopedics successfully collected over 90 percent of copay obligations by auditing how every staff member handles 10 visits each month. The practice held staff accountable for a 100-point scorecard that records and rewards when staff members explain a patient's responsibility, explore payment plans, and more.

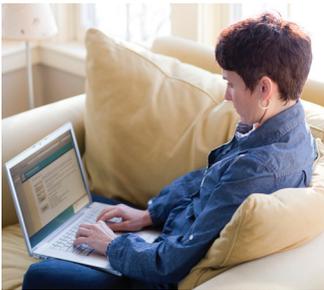


2) Set financial expectations ahead of the visit

It's always good to know where patients stand before they enter the door. By reaching out

before an appointment, a medical office stands a better chance of collecting an outstanding balance.

So some organizations call patients a few days ahead of their scheduled visits, to determine whether they're in good standing and go over outstanding obligations. This can be crucial for patients who carry large balances or are coming in for expensive treatments. It's a way that Arcis Healthcare, a 28-physician orthopedic group in South Carolina, has managed to collect 96 percent of patient obligations.



3) Communicate openly, and regularly, with patients

No one likes sticker shock. Procedures such as MRIs and CT scans can carry surprising

price tags – and insurance plans can easily overwhelm even the most informed patients. So practices that go the extra mile to explain a patient's deductible, co-insurance, and annual out-of-pocket maximum tend to be more successful at collecting payments, especially for high-cost services.

Bellevue, a Washington State medical clinic that collects over 90 percent of all patient obligations, keeps up an ongoing dialogue with patients about their billing and insurance status. Once a patient hasn't paid after two notices, the organization makes sure something is collected, even if it isn't the full amount.



4) Offer payment plans, avoid the collection agency

Gentle and not-so-gentle reminders don't always work. Continued non-payment – especially

for a large balance that has lingered for months – may mean it's time to send the bill to a collection agency or deny treatment until the patient has paid. But medical offices need to consider a patient's health and medical history when declining care, and communicate drastic actions to patients before their visits.

Oklahoma City-based OKC OB/GYN, which typically collects around 79 percent of patient obligations, offers payment plans to accommodate patients with large balances. But the office will reschedule patients with significant balances who aren't willing to pay at the time of service and won't commit to a payment plan.

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Image credit: David McLain, Darlene DeVita



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