



— PATIENT — ENGAGEMENT



PATIENT ENGAGEMENT

Today's effective patient billing processes combine advanced analytics and workflow automation to drive a well-planned strategy for Patient Engagement. Individually, the concepts are not game-changers; however, they increase active self-pay revenue and boost patient satisfaction when perfectly integrated.



WORKFLOW AUTOMATION



CONNECTING THE DOTS:

SCORING. SEGMENTING. AUTOMATED
WORKFLOW. NOW WHAT?

OPTIMIZING PATIENT ENGAGEMENT

Today's effective patient billing processes combine advanced analytics and workflow automation to drive a well-planned strategy for Patient Engagement. Individually the concepts are not game-changers. However, when perfectly integrated, the synchronization increases active self-pay revenue and boosts patient satisfaction with the billing process.

Many studies have demonstrated that a patient's payment experience colors their overall feelings of satisfaction. As in retail, customer satisfaction is vital as patients begin to exercise greater choice, both in how much to pay and where to go next time. Generally, the last impression is a lasting one.

Many innovative providers are already rethinking the role of revenue cycle in overall patient engagement strategies and have discovered that positive billing and payment experiences can impact patient satisfaction and loyalty and reduce costs and raise revenue. It is a new world for providers as self-pay represents a Business-to-Consumer model that many were not prepared for when the industry lived so long in a solely Business-to-Business model between the provider and payers.

An expertly executed patient engagement strategy, fostering a satisfying patient experience, includes:

- Early and consistent contact with patient education surrounding the billing process
- Easy-to-use technology and digital tools
- Building patient trust in the process (and keeping it)
- Patient-friendly statements
- 24/7 access and convenience for information and payments
- Personalized contact
- Varied and convenient payment options



EARLY & CONSISTENT CONTACT

Early and consistent patient contact with educational content regarding the revenue cycle and billing process allow the patient to understand and plan toward their out-of-pocket expenses with a better understanding of the process as a whole.

BEST PRACTICES INCLUDE:

- Providing instructive infographics that illustrate the billing process as handouts at access points or strategically - placed kiosks with short, interesting, and informative videos at access points
- Adding short videos to websites/pay portals explaining the patient billing process and what to expect
- Providing inserts in statements that are easy to read and understand

PROVIDING EDUCATIONAL CONTENT ON:

- What to expect when the patient leaves
- What is an EOB?
- What is an Insurance Contractual / Adjustment?
- How services are charged

“...revenue cycle and billing process allow the patient to understand and plan toward their out-of-pocket expenses...”



RAPPORT & TRUST

A great patient experience requires that rapport and trust be established and sustained between the provider and the patient. A QA process that thoroughly vets the patient balance before sending the billing statement is critical to building rapport and trust. Inaccurate billing creates distrust in the billing process and slows the speed of cash; conversely, employing a simple quality control before bill drop ensures accuracy the first time around. Those who have received inaccurate statements are less likely to pay the first statement for future services. When a patient requires assistance, advocacy, and thorough, timely follow-up is essential to a superior patient experience - anything less diminishes the patient's trust in the process.

A patient advocacy program provides a personalized touch to educate, consult, and assist the patient, with friendly, professional assurances that inquiries or concerns are heard and addressed while nurturing confidence in the process.

PATIENT-FRIENDLY STATEMENTS

Navigating billing statements and understanding charges is becoming increasingly cumbersome for patients as out-of-pocket expenses increase. High deductibles, coinsurance, copay, non-covered charges, out-of-network expenses, and multiple bills from both the professional(s) and institution contribute to a very confusing patient billing experience. It is not uncommon for patients to believe they are being billed multiple times for the same services as patient statements to drop following a visit.

Industry innovators have begun to combine as many professional and institutional charges to one bill as possible to limit the number of statements a patient receives for a single procedure or visit while clearly indicating and highlighting the types of charges included on the statements. Some leaders take the additional step to coordinate policies to allow combined payment plans and discounting policies for outstanding professional and institutional balances.

Another important feature is to simplify and focus statement design to ease understanding and clarity, which may include vibrant aesthetics, imagery, or messaging appealing to the reader. For example, if the patient is an adult female, the statement messaging may include a yearly physical or mammogram reminder. Designing statements with formatting similar to an EOB, with a note encouraging the patient to [TO2] compare the statement to an EOB, provides familiarity for the patient to digest and understand the balance due with greater ease. At the same time, overengineering statements with an array of summaries, colored boxes, multiple fonts, and superfluous design elements can confuse the patient. Generally speaking, simplicity is often the best way to present information, especially when it is both quantitative and qualitative. [CG3]

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EASE OF ACCESS

Empowering patients to manage their patient account promotes a successful outcome. Three ways that organizations can empower healthcare consumers through their patient revenue cycle include mimicking customer strategies, integrating your billing and payment solutions, and enabling self-service options.

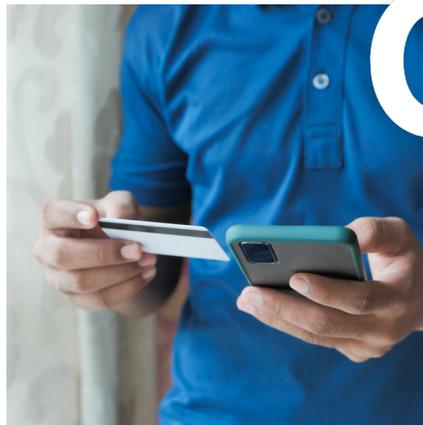


01

MIMIC CONSUMER STRATEGIES

Online and self-service are mainstream in key retail, banking, and travel industries. Fifty-eight percent of consumers prefer self-service banking, and 69% prefer to pay their energy bills online. Given the choice between greater transparency and convenience, people will choose self-service – and healthcare billing and payment options should mirror these trends.

MIMIC

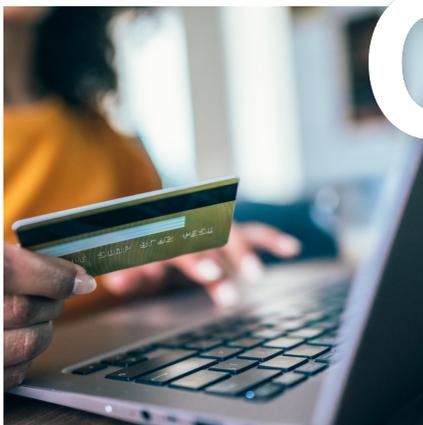


02

INTEGRATE YOUR BILLING & PAYMENT SOLUTIONS

Challenge the traditional view of patient billing by incorporating a modern, clean, jargon-free design focused on driving patients to your website. At AUHealth, online payments increased by 2.5 times within four months of revamping their self-service payment options.

INTEGRATE



03

ENABLE SELF-SERVICE

- Allow patients to quickly and easily find the website and pay their bill online.
- More to the point, ensure a clear call-to-action on the homepage to capture the inbound flow of patients seeking to make a payment.
- Once they're ready to pay, ensure the payment flow is fast, easy, and secure.

ENABLE



EASE OF ACCESS CONTINUED

Self-service IVRs, robust patient portals, Mobilepay, and Text to Pay options, and even expanded hours of operation allow patients to manage the patient billing process on their own terms. A comprehensive self-service IVR will provide an explanation of the balance due and direction to commonly asked questions, in addition to prompting available payment.

An effective patient billing portal should allow the user to:

- view and print previously received patient bills
- review the up-to-date status on current patient bills, charity, and payment plan policies
- produce a statement on command
- manage payment plans
- submit requests and speak to a customer care representative

Bare-bone “patient portals” that merely accept payments do not increase patient satisfaction with the billing experience.



PERSONALIZED CONTACT

No two patients are the same, so why treat them that way? Today's advanced analytics, integrated with workflow automation, allows an organization to promote a better patient experience by enabling the patient to choose how they would like to be contacted regarding an outstanding balance.

Similar to the way consumers manage their utilities or revolving credit, patients expect options. A combination of patient-friendly statements, email, text messaging, and paperless billing are effective methods of personalized contact when included in an automated workflow. Paperless billing not only reaches the recipient quicker, which in turn gives the patient more time to remit payment before the due date, but it also allows the patient to access the bill from anywhere, anytime, 24/7.

VARIOUS PAYMENT OPTIONS

While healthcare reform has significantly increased the number of insured patients, most of the covered individuals have plans with significantly high out-of-pocket costs – healthcare providers across the country are experiencing the resultant increase in self-pay accounts receivable. To optimize recovery from these accounts, it is imperative to establish payment policies offering various payment options ensuring that patients who do not have the ability to pay in full have entered into a payment arrangement.

Patients desire the ability to schedule payments on their terms, including determining the payment method, type, and frequency. Progressive providers enable automated and manual payment plan options that include the ability for the patient to utilize all major credit cards, E-Check, HSA cards, mobile payment options like ApplePay and GooglePay, and in some cases, financing.

Payment options for patients include the ability to pay in full or to enter into a payment arrangement through various outlets, whether in person, through a self-serve patient portal, IVR, or with the assistance of a customer care representative.

Many successful policies require that patients enter into a payment agreement on any open pre-existing account balance before scheduling a new appointment. Although this is sometimes difficult to enforce, it is vital to foster a culture of payment.

“Bare-bone patient portals that merely accept payments do not increase patient satisfaction with the billing experience.”



TYING IT TOGETHER

Favorable patient engagement will increase when messaging conveys respect and appreciation. Early and consistent contact providing education about the process and patient expectation is key to a successful and timely outcome.

Implementing practices that foster trust and assuring that all customer-facing staff are trained to build a rapport with your patient population is essential to the process, along with patient-friendly statements that pull as much information together in an easy-to-read and relatable way.

In addition, patients who can access their accounts at their discretion and on their time and terms are more likely to take ownership of the process. Patient portals that allow patients to add insurance, set up payment arrangements, review statements, and speak to customer care representatives at their convenience increase the quality of patient contact and build patient engagement success.



Contacting patients in the way that they are most likely to respond is key to a successful campaign. Gone are the days when patients were merely contacted via statement once a month. Phone calls, text messaging, and email allow the patient to be contacted in their preferred way. Finally, payment options that account for the changing landscape in patient responsibility while consistently adhering to firm payment plan policy will encourage a culture of payment.

“...patients who can access their accounts at their discretion and on their time and terms are more likely to take ownership of the process.”