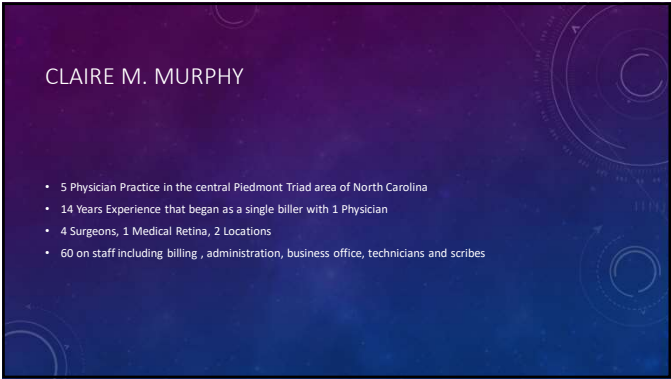




CHALLENGES IN PATIENT BILLING

CLAIRE M. MURPHY
CEO, PIEDMONT RETINA SPECIALISTS, PA



CLAIRE M. MURPHY

- 5 Physician Practice in the central Piedmont Triad area of North Carolina
- 14 Years Experience that began as a single biller with 1 Physician
- 4 Surgeons, 1 Medical Retina, 2 Locations
- 60 on staff including billing , administration, business office, technicians and scribes



FINANCIAL DISCLOSURES

- Speaker Bureaus: Regeneron, Apellis
- Advisory Boards and Panels: Outlook, Apellis, Iveric Bio, Engage Education, Deerfield Research
- Consulting: Samacare, PX Technology , Iveric Bio

WHEN I ASK A PATIENT TO
PAY THEIR BILL...

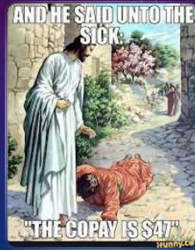
HOW THE
PATIENTS SEE US



OUR REALITY

- Staff Compensation
- Healthcare Costs
- Accounts Receivable
- Wait Times
- Supply Inflation
- Reduced Reimbursement
- Comp Formulas
- Rent
- Patient Demand
- Increased Deductibles
- Facility Expenses
- Office Supplies
- Physician Recruitment
- Staffing Shortages
- IT Cost
- Back Orders
- Meeting Cost
- Overhead
- Insurance
- Competitive Pay
- Drug Cost
- Bonuses

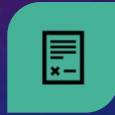
PATIENT COLLECTIONS AND BILLING: HOW DO WE BALANCE GETTING PAID WITH PROVIDING CARE TO THOSE WHO NEED IT?



OFFICE VISIT COPAY



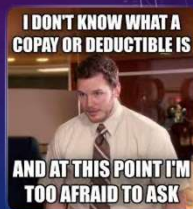
THE EASIEST AND HARDEST PAYMENT TO COLLECT.



DUE AT TIME OF SERVICE PER THE CONTRACT BETWEEN THE INSURANCE COMPANY AND THE PATIENT.

TIPS ON COPAY COLLECTION

- Patients tend to have a lack of understanding regarding their insurance terms and responsibility. Educating your front desk staff is imperative to collection at the time of service. A patient who understands their copay or balance is much more likely to pay their bill.
- Create clear and consistent office policy based on your practice needs. Office policy should be visible and communicated wherever necessary. Staff should be knowledgeable, and patients informed.
- Approach & respond with **KINDNESS**. We don't know what someone is going through, especially those on a fixed or lower income.
- Have a plan of what you want done if a patient cannot pay at the time of service and be consistent.
- Because it is a violation of the patient/insurance contract, you can turn a patient away if they cannot pay their copay at the time of service.



ESTIMATES... AND NOT JUST FOR SURGERY



ANNUAL DEDUCTIBLES AND CO-INSURANCE RESETS EVERY YEAR, AND FOR COMMERCIAL PATIENTS, THAT IS NOT ALWAYS JANUARY 1.



THERE ARE MANY TOOLS FOR COST ESTIMATES THAT ARE IN YOUR PM SYSTEM, OR CAN BE SUPPLEMENTED, BASED ON YOUR PRACTICE'S FEE SCHEDULE.



COLLECTING PAYMENT IN FULL AT TIME OF SERVICE IS THE IDEAL BEST PRACTICE.

PATIENT STATEMENTS

- Healthy Patient Revenue comes from carefully constructed billing infrastructure.
- Send out statements regularly.
- Do patients have easy payment access and resources for billing questions?
- Make past due balances very clear.
- Check balances at check in, even notifying patients before their visit that their copay and balance will be due.



PAYMENT PLANS

- Will your practice accept them?
- Is it be easy to enroll the patient and keep their financial information secure?
- Take into consideration: minimum payment, term of payoff, will you charge a finance fee and what happens when a regular patient is non-compliant with the agreement?
- How do you monitor adherence?

EXTERNAL COLLECTIONS

- Shop around for a good plan and low collections ratio.
- Consider a flat fee for small balances or keep those accounts internal.
- Make sure to track these patients and make a plan for their medical care, even if that means no longer seeing the patient.
- Offering a limited time payment in full discount before collections has been successful in our practice.



HOW CAN PEOPLE STILL GET CARE ?

Provide discounted services for self-pay patients.

Refer patients to local community or government programs that could provide help.

University settings can also be a better fit for an indigent patient, especially if they do not get regular medical care.

Kindness and a supportive attitude can make a big difference.

A patient will usually be able to get emergency care at an Emergency Department.

Also, hospital call patients may be treated differently. Make sure to know if your hospital has any rules about patient collections.

QUESTIONS?

