

Internal Efforts to Improve Pointof-Service (POS) Collections

Northwestern Medicine

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Introductions



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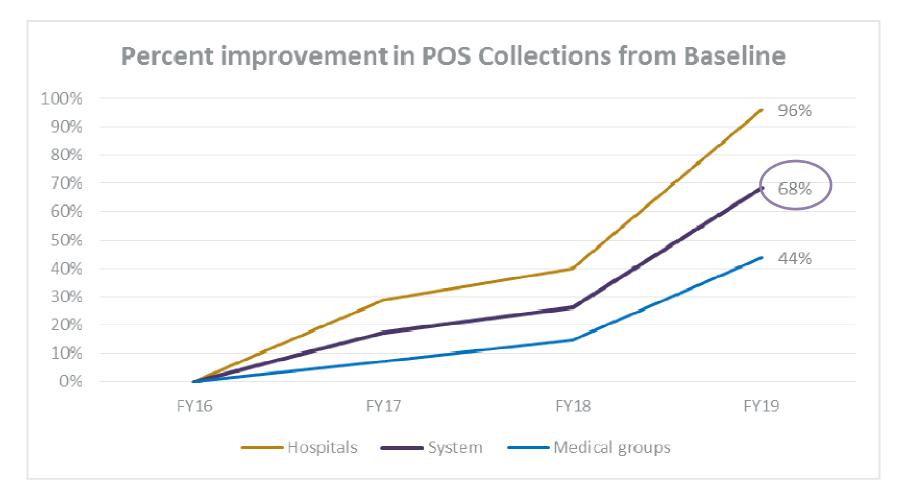




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NM Improved POS Collection by 68% Over 4 Years

Results achieved through development of tools, training, executive focus, and change management





*Graph above represents percent increase for business units in-scope since FY16

Why Is Point-of-Service (POS) Collection Important

Assists our patients in understanding their financial obligations and reduces administrative waste

Patient Focus:

- Understand benefits and costs in advance
- Helps patient's financial planning
- Helps patients seek financial counseling
- Sets clear expectations
- Focus visit on clinical care

Financial Focus:

- Reduces cost to collect
- Expedites cash; reduce AR
- Reduce Bad Debt risk
- Improves propensity to pay
- Reduces vendor costs

Start with the patient experience

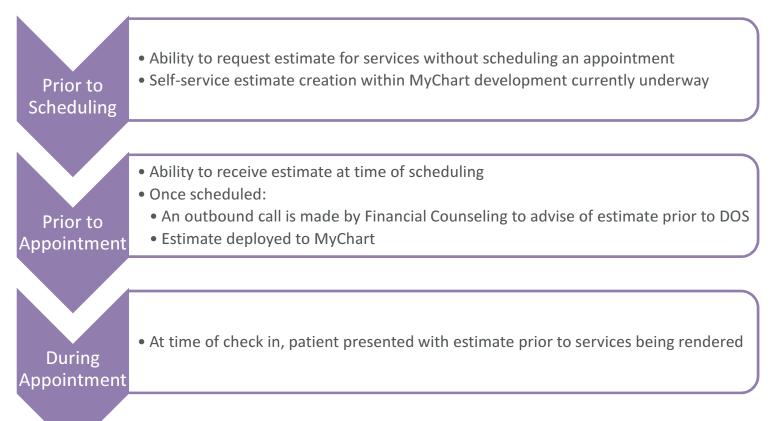
Why is POS

Important?



Improving the patient experience

Mitigating surprise billing by providing price transparency throughout the patient experience also allowed for positive financial outcomes



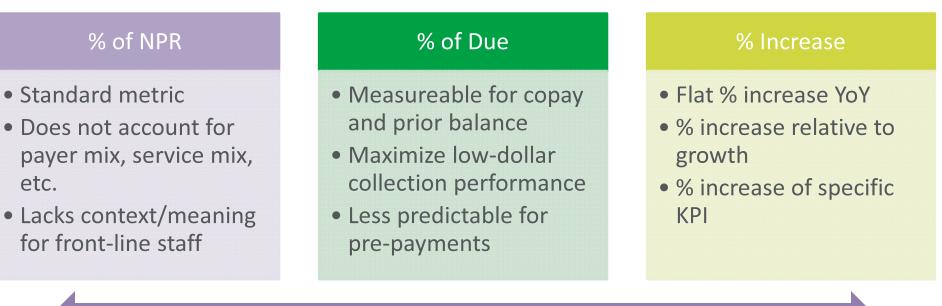
Patients have the ability to apply for financial assistance, set up a payment plan, and/or make payment at any stage.



Executive Charge on POS Collections

Evolution of Methodology

- Each methodology has it's pros and cons
- Ultimately, seek to develop goals that leverage the best of each methodology
- Include elements of process metrics



Leverage and Measure All



Associated Challenges with Sources of POS Collections

Part 1: Copayments

ID	Challenge	Solutions	Examples
1	Real-time eligibility	Partner with managed care and IT to report payer or Experian inaccuracies; customizing payer alerts and logic	UHC 2 deductible
2	Benefit tiers	Partner with managed care and IT to pull correct RTE value based on contract	Tier 1 plan
3	Benefit engine logic	Partner with Access team to modify visit types, specialties, dually insured, etc.	Int med split
4	Out-of-Pocket Maximums	Partnered with IT to create an OOP max alert for check-in staff	Complete
5	Culture change	Train staff, and help set expectations for patients	Online, in- clinic training, Signage
6	ED Copay Collection	Developed track board to determine appropriate timing	ED Copay

Associated Challenges with Sources of POS Collections Part 2: Prior Balance

ID	Challenge	Solutions	Examples
1	Inability to pay higher balances	Steer patients towards financial counseling for support	Training, workflow
2	Patients may not understand why they have a balance	Educated users on how to print statements, steer towards billing support when needed	Training, workflow
3	Patients have other financial priorities	Provide payment plans options, including at registration	Training, workflow
4	Statement does match guarantor balance	Partnered with IT to develop a solution to display both balances	Training, workflow
5	Understanding the patient experience	Review patient satisfaction survey responses and work to address opportunities	Call Ctr workflow



Associated Challenges with Sources of POS Collections Part 3: Pre-payments

ID	Challenge	Solutions	Examples
1	Accuracy of estimates	Migrated from vendor estimates to Epic Estimates	Tracking
2	Managing refunds	Improve estimates to reduce refunds; under- collect is preferred to over-collect	Tracking
3	Patients arrive uninformed of estimate due	Developed an outbound call center to attempt collection or pre-payment amounts for procedures, diagnostics, OON, and self- pay visits. Build into MyChart pre-check-in.	Financial counseling
4	Patients want to engage electronically	Partnered with IT to develop MyChart Estimate deployment; allowing patients to complete pre-registration activity and estimate payment online	MyChart



How We Sought Change

Change management supported by advanced analytics and IT development

- Operations and change management
 - Feedback and communications
 - Refine and retrain scripting; online and onsite learning options available
 - Small stuff matters (cash banks, credit card machines, receipts, etc.)
- Analytics
 - Benchmark our current performance
 - Analyze trends and inconsistencies at multiple levels
 - Enhance user level reporting
 - Payer trends
- Supporting technology
 - Epic v2018 upgrade; manager dashboards
 - Benefit engine configuration
 - Estimates design and build



Other efforts being pursued

- Continue to build on Hospital service Epic Estimator for accuracy
- Leverage Epic Estimator tool to identify OOP for ambulatory HDHP visits
- Explore options to gather estimates for office-based procedures
- Expand use of MyChart in collecting copays and pre-payment estimates
- Explore economical options to enhance financial clearance outreach for estimates
- Continue to enhance real-time-eligibility (RTE) response accuracy
- Provide additional training for front-line staff and dept managers
- Explore options for patients to elect to store credit card information on file
- Explore options to enhance access to payment plans, and ease processing
- Explore cost-to-collect KPIs and invest in lean solutions
- Enhance ASAP module copay reporting
- Explore enhanced Lab estimate



Thank You

