



Teach Your Team to Soar
HFMA Region 9 Webinar
November 24, 2015



Dave Lamar, Executive Vice President of Sales and Marketing – PatientMatters, LLC.

Dave leads the Sales and Marketing teams at PatientMatters as a member of its executive leadership team. Dave's been involved in delivering hospital information Systems for over 20 years. His experience includes full clinical system, patient financial systems, practice management systems and numerous ancillary/bolt-on solutions. Dave held leadership roles at Eclipsys, Caremedic and OptumInsight where he developed a deep understanding of the do's and don'ts around investing in systems in a way that insures outcomes are achieved.

At OptumInsight, Dave was a member of the Accountable Care Solutions team. This group was tasked with coordinating United Healthcare's Plan & Network teams with Optum's Care Management and Payer teams to address the provider challenges associated with the new reimbursement models. This experience helps inform all the work PatientMatters does with providers around the patient's role in these new payment models.

Dave is a graduate of the Kelley School of Business at Indiana University and holds a Bachelor of Science in finance.

Doug Bilbrey, Regional Vice President – PatientMatters, LLC.

Bilbrey has worked in Healthcare since 1988 and has held positions related to technology, operations, sales, marketing and executive leadership. He served as President for The Cooperative Exchange from 2009 – 2010 and has served on several industry committees.

His healthcare background includes positions with HBOC and Company (now McKesson), Bronson Healthcare Group – Kalamazoo MI, The SSI Group, Inc., Boston Software Systems, Firstsource / MedAssist and PatientMatters. He is responsible for business development in all of the HFMA Region 9 states.

His speaking experience includes: HIMSS, HFMA ANI, HFMA Map Event, AAHAM, AHIMA, Siemens Innovations National User Group Meeting, The SSI Group, Inc. National User Group Meeting and several local and regional HFMA Chapter Events. He is an HFMA member and is engaged with several chapters across the country.

Jason McNeil, Director – Solution Strategy – PatientMatters, LLC.

Jason McNeil is an accomplished management and solutions development executive with experience in the healthcare, information technology, and consulting industries. He brings to PatientMatters more than 18 years of domestic and international experience in provider and payer-side Healthcare Revenue Cycle Management (RCM) and Systems Development. His RCM expertise includes information and operating systems design, development, and implementation, performance assessment and improvement, and change management.

Prior to PatientMatters, Jason has held the positions of VP & Managing Director of Solutions Delivery at DaVincian Healthcare, Senior Director of Revenue Cycle Solutions Optum Middle East, a division of United Health Group, Vice President, Sales & Implementations, Health Business Solutions, LLC, and Managing Partner and Co-Founder of The Jryth Group, LLC, a healthcare consulting and custom software development firm.

Jason's unique understanding of the RCM challenges facing the Healthcare Industry has resulted in his successfully designing, developing and implementing of RCM solutions for healthcare providers and payers that maximize productivity, decrease costs and improve the patient's experience. He has completed performance assessment and improvement engagements in every segment of the healthcare revenue cycle, developed a variety of end-user RCM software tools and successfully designed, built and deployed a comprehensive, region-specific RCM system solution for the healthcare markets in Abu Dhabi & Dubai, UAE.



Patients are now responsible for an increasing amount of their cost of their care and don't understand why.

As Hospitals and Systems cope with ever increasing pressures on their bottom line, their fiscal health is dependent on how well they know their patients financially.

What's missing is a standard patient data set – as there is for third party payers – to allow hospital staff to have effective financial conversations with patients. Imagine if your patients understood their obligations and payment options.



Do you know your patients financially
as well as you know them clinically?

Turn *uncomfortable conversations* into informed and
engaging discussions regarding the patient's obligation.

Patients become *educated healthcare
consumers*.

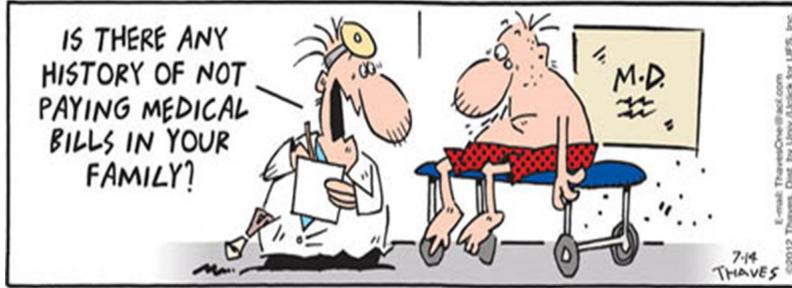
Patient Financial Care Plan

How well do you know your patients from a financial perspective?

With interaction starting at the first point of contact, work with patients to establish a *financial care plan*, similar to a clinical care plan. Like a clinical care plan, a financial care plan continues well after the services are rendered .

- Educate the patient about their coverage
- Estimate their financial obligation
- Offer options to address payment
- Let them know you are there to help





Used with permission from the Cartoon Group.

Turn the uncomfortable conversations about what a patient or guarantor owes into an engaged and informed exchange that results in an understanding of why they owe and the options the hospital offers.



What is your Bird type?



What bird types are in your Patient Access Staff?

Most hospitals have **doves** in their Patient Access. Because Patient Access employees are often:

- compassionate
- people-oriented

Can a dove be an effective **Point of Service collector**?

What kinds of **training and scripting** would you employ?



Key Areas of Cash Leakage in Hospital Patient Responsibility

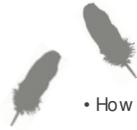


Is your staff engaged in meaningful patient conversations?

If not, you are missing opportunities every day!



Indicator	Leading Practice
Pre-Registration Days Out	7
Pre-Registration Insurance Verification Rate	100%
Registration Accuracy	≥ 95%
Overall Insurance Verification Rate	≥ 95%
ED Patient Cash Collections Prior to Discharge	≥ 50%
Upfront Patient Cash as a % of Net Patient Revenue	≥ 2%
Screening of Uninsured & High Balance for Financial Assistance	≥ 98%
Bad Debt Write-off as a % of Gross Patient Revenue	≤ 3%
Bad Debt Write-off as a % of Net Patient Revenue	≤ 6%



- How well do you know your patients financially?
- Are you employing patient estimation software?
- Is propensity to pay included in your technology tool set?
- Do you employ custom scripts tailored to your Patient Access Staff's personality traits?
- How well is your organization performing?

Daily Opportunity Report

The purpose of the **Daily Opportunity Report** is to provide Hospital Managers with daily information regarding the **collection performance** of their patient registration representatives. The report compares patient collection amounts to the estimated patient out-of-pocket at the point of service or during **pre-registration**, by patient registration representatives.

Using the report, Hospital Managers can identify **opportunities** to enhance the **patient engagement experience** and improve patient collections.

A/C No.	Patient Name	FC	INS.	Service Type	Elig. Tot OOP	POS Pref.	POS Disc.	% OOP Col.	Rep
1	--	MR	MRB	VRAD	\$147.00			0.00%	1
2	--	HP	HMO	VER	\$100.00	\$80.00	\$20.00	100.00%	1
3	--	MDW	MDWV	VER	\$8.00	\$8.00	\$2.00	125.00%	1
4	--	MDW	MDWV	VER	\$8.00			0.00%	1
5	--	MRCH	MRHC	VER	\$65.00	\$52.00	\$13.00	100.00%	1
6	--	MDW	MDWV		\$8.00			0.00%	1
7	--	MR	MR		\$1260.00			0.00%	1
8	--	MRCH	MRHC	VER	\$50.00			0.00%	1
9	--	BC	B444		\$91.19			0.00%	1
10	--	MDW	MDWV	VER	\$8.00			0.00%	1
11	--	MDW	MDWV	VER	\$8.00			0.00%	1
11	--	MDW	MDWV	VER	\$1,763.19	\$140.00	\$35.00	9.98%	3
12	--	HP	HMOEM p	VER	\$100.00	\$120.00	\$10.00	130.00%	2
13	--	MR	MR		\$147.00	\$40.00		27.21%	2
14	--	CD	LIFMC	VER	\$350.00	\$80.00		22.85%	2
15	--	MDW	MDWV	VER	\$8.00			0.00%	2
4	--				\$605.00	\$240.00	\$10.00	41.32%	2
16	--	MR	MRB	VSPECRU	\$0.32			0.00%	3
17	--	BC	B444	VLAB	\$500.00			0.00%	3
7	--				\$50.32			0.00%	3
18	--	BC	B444		\$370.00			0.00%	4
3	--				\$370.00			0.00%	4
19	--	MDW	MDWV	VER	\$8.00			0.00%	5
20	--	MDW	MDWV	VER	\$8.00			0.00%	5
21	--	MRCH	MRHC	VER	\$1065.00			0.00%	5
22	--	MRCH	MR		\$1260.00			0.00%	5
23	--	MR	MRB	VLAB	\$147.00			0.00%	5
24	--	BC	B444	VRAD	\$500.00			0.00%	5
6	--				\$2,988.00			0.00%	5
24	--				\$6,216.51	\$380.00	\$45.00	6.84%	5



Plan

- Staff personality traits
- Patient financial attributes
- Current adherence to KPIs
- Technology elements missing
- Patient statements
- Short, interim and long-term objective



Communicate

- Training plan
- Goals and objectives
- Physicians
- Executive leadership
- Board of Directors
- Community
- Patients

Execute

- Scripting for staff
- Deploy technology
- Training
- Patient-friendly statements

Measure

- POS Collections
- Early out and bad debt
- Patient days to pay
- Adherence to KPI goals
- Patient satisfaction
- Community perception

Recommendations

Align services and technologies to meet patient financial care plan objectives

- integrated
- practical
- seamless to patient

Ensure consistent financial assistance programs

- payment plans
- discounts
- loan program





Conclusions

Effective financial conversations with your patients will make it much more likely your patients will understand and pay their obligation.

Patients will see your hospital/system as an advocate.

- improved patient satisfaction scores
- patient loyalty

Improved Financial Performance

Reduced Bad debt



QUESTIONS?

SAVE THE DATE
C3 Summit 2016

January 14th - 15th
Waldorf Astoria | Bonnet Creek
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