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Improve Patient Experience and Financial Outcomes through Payment Plan and Patient Statement Redesign

Presenter: Jacob Rouse

bellinhealth | Official Healthcare Partner of the Green Bay Packers

1

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Short Description for Agenda

Review Bellin Health System's patient experience project that consisted of:

– Implementing online payment plans
– Revamping the systems payment policy
– Revamping self-pay accounts receivable workflow processes

That ultimately lead to an improved patient experience and revenue cycle expense reduction

2

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Learning Objectives

At the conclusion of this session, learners will be able to...

• Objective 1:
– Have considerations on how to make evidence based and patient centric revenue cycle decisions, and successfully implement the decisions

• Objective 2:
– Have strategies revenue cycle can use to incentivize patients to activate EHR patient platforms (example: Epic MyChart)

3

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System and Presenter
Introduction

4

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Introduction: Bellin Health

- Integrated healthcare organization focused on improving health and driving a value based delivery model

- 42 Locations

- $640B Operating Revenue

- Volume
  - 1.12M Clinic Visits
  - 274K Outpatient Visits
  - 27.5K Surgeries
  - 10.1K Inpatient Admissions

5

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Introduction: Bellin Health

- MISSION
  - In partnership with the people of Northeast Wisconsin and the Upper Peninsula of Michigan, Bellin Health strives to improve the health and wellbeing of every person in our region while making healthcare quality, experience and cost the best in the nation.

- VISION
  - People in our region will be their healthiest during every stage of their lives, and will be able to afford the services and products we provide.

- STRATEGIC OBJECTIVES
  - Objective 1: Optimal Customer Experience
  - Objective 2: Team Culture
  - Objective 3: Care Excellence and Community Health Improvement
  - Objective 4: Growth & Sustainability

6

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Introduction: Jacob Rouse (Presenter)

- Career began in retail operations management. Moved into healthcare to align personal values with the organization and industry

- Experience: operations management, finance, accounting, revenue cycle, expense reduction projects, forecasting & budgeting projects, customer engagement projects, business growth projects

- MHA, CRCR, active HFMA user and member

- Contact Info
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7

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Project

8

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Project Background

- Background: over last year, Bellin increased focus on upgrading patient experience elements of EHR (Epic)

- Project Name: Patient Financial Experience (PFE): Go live March 2019

- Guiding principles
  - Make things easy
  - Increase self service options
  - Maximize EHR system (Epic)
  - Provide retail feel (modern, intuitive, clear, visually appealing)
  - Price transparency (pre and post service clarity on out-of-pocket cost)

- Key sub-projects within project
  - Enhanced scheduling and registration functionality in MyChart
  - Patient estimates in MyChart
  - **Statement redesign**
  - **Epic managed bad debt process**
  - **Payment plans: MyChart & auto-draft**

9

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PFE Measures of Success

- Win for Patient
  - Self service tool (Epic MyChart) to connect with providers and self manage financial responsibility
    - Measure of success = 40%+ of patient payments coming from MyChart (started 14.2%)

- Win for Clinical Team
  - Driving EHR patient platform (Epic MyChart) activation so patients can engage in their health and communicate with care teams (system initiative)
    - Measure of success: exceed internal system usage measures

- Win for System
  - Savings and redesign:
    - $500k annual savings
    - 100% of payment plans being auto withdraw (started 0%)
  - Improved patient experience (measure TBD)

10

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Subprojects

- Intermingling between subprojects:
  - Statement redesign
  - Epic managed bad debt process
  - Payment plans: MyChart & Auto-Draft

- Steps within projects
  - Review customer voice
  - Living wage assessment
  - Determine payment plan terms
  - Statements that drive patients to MyChart
  - Financial Impact analysis

11

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Review Customer Voice

- Problem's to solve
  - Healthcare produces balances that are difficult for patients to understand and resolve

- Research sources:
  - Our patients (including employees)
  - United Way ALICE Reports and Living Wage Analyses
  - Healthcare Financial Management Association
  - *A Bill You Can Understand* research study
  - Competition
  - Other sources (Advisory Board, Institute for Healthcare Improvement, Becker's Healthcare, Advertising Sources, etc.)

12

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Review Living Wage

- For financial assistance: many use federal poverty guidelines to determine level of approval
  - Issue: poverty guidelines based on basic needs, not basic standards of living

- United Way ALICE (Assists Limited, Income Constraint, Employed) is an excellent resource to understand the cost of living (meeting basic standards) regionally

- Steps to determine payment plan terms, reviewing:
  - Healthcare budget within ALICE
  - Healthcare premiums and out of pocket cost in our region
  - Income levels against Financial Assistance Policy
  - Standard range of annual payments, charity, bad debt of patients and families
  - Ultimately predict: the amount of time patients and families need to reasonably pay off balances

13

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Determine Payment Plan Terms

- After analysis, decided following SHOULD meet MOST of our patients needs:
  - 6 months to resolve any given balance
  - 24 months with auto draft payment plan (*balances not auto added*)

- Financial Assistance Policy updated to reflect

General Terms	OLD	NEW
Pay in full	30 Days or set up payment plan	According to terms
Call from Customer Service	35 Days	60 Day
Monthly payment required	100	100
Time to resolve before going to collections	6 Months	6 Months
Belin Internal Payment Plan		
Monthly minimum	100	100
Payment Installment Process	Manual (send check, call cust service, pay online)	Automatic withdraw (credit card / bank account)
Time to resolve	6 Months	24 Months
Beyond Payment Plan Terms		
Collections	Yes	Yes
Partner	Outside Financing	Outside Financing (TBD)

14

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Bad Debt Process

- Prior: 3rd party partner managed turning accounts over
  - PRO: controlled, organized, established process
  - CON: EHR (Epic) not source of truth, manual touches

- To help patients understand their time to resolve balances, EHR (Epic) need to be source of truth

- To achieve: built rules and testing, revamping, testing, testing, revamping, testing, testing, testing, testing, revamping, testing …..

- Ultimately, found rules that managed balances according to our Financial Assistance policy

15

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Statements: Guiding Principles

- No such thing as perfect statement: stay true to guiding principles (driven from best practice research)

- Use "A Bill You Can Understand" winning statement as template and constant reference

- Clear and concise:
  - IF IT IS NOT NEEDED, DO NOT HAVE IT
  - Easy reading: low reading level, eliminate jargon

- Provide clear intent to easily answer
  - How much due?   When due?   Options to pay?

- Visually prompting (colors, images, information)

- Drive EHR Platform (Epic MyChart) traffic

- Meet Bellin Brand Guidelines

16

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Statements: Variations

- Simple statement is easy with simple situations
  - Example: 1 visit, 1 low balance, 1 statement, 1 payment = resolved balance

- Complexity to simplify
  - Old balances
  - New balances
  - Large balances
  - Balances needing immediate attention
  - Existing payment plans
  - Balances still processing with insurance

- Result: 42 potential variations of statements to walk patient through this complexity and drive all patients to MyChart (non-users sent activation code)

17

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Statement Examples

Old Statement (prior to project)

- No Cover
- Running detail
- Balances usually tied
- No MyChart prompt
- No clarity of specific action needed

18

9/16/2019

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Statement Examples

Non-MyChart Statement

- Benefits of MyChart (Bill Pay LAST)
- MyBellin.org prompts signup, but can easily process through pay as guest
- Activation code

19

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Statement Examples

Final Notice (next step = collections)

- Color prompting
- Clearly States what balance amount is most urgent
- Page 3 is final notice letter and account detail

20

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Statement Examples

Payment Plan Statement

- Informational
- Action given based on different scenarios (new balance, no balance, small balance, etc.)

21

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Slide 22

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Statement Examples: Detail Sections

Note: next pages of statement show detail of processing broken down into these categories

| ACTION NEEDED | No Action Needed, Pending with Insurance |

This section is new balances and balances not on an automatic payment plan. Please log into MyBellinHealth to view details and set-up a payment plan (or call 920.445.7210 and speak with customer service).

These visits are still pending with insurance. No action is needed unless requested.

If there is a balance listed in the "Your Remaining Balance" column, a portion of the mentioned claim(s) is/are still pending with insurance. Your responsibility to pay this balance begins when the entire claim is processed by insurance (unless you choose to make a payment prior to this point).

| FINAL NOTICE | No Action Needed , Balances on Payment Plan |
| Important Notice | An automatic payment of $100.00 is set to process for 9 more months. |

Dear Patient,

You are past due on the below balance. This balance will be listed with our collection agency after the due date. You have two options that may prevent this:

Option 1: Create or visit your MyBellinHealth account at MyBellin.org, to review your balances and set-up or manage a payment plan. You may also pay in full via mail.

Option 2: Call us at 920.445.7210 to discuss payment options including:
• Arranging a payment plan
• Free or discounted care for those who qualify

You can also learn more at www.bellin.org/patients_visitors/patient-information/financial-assistance or by stopping at any registration desk.

If the balance remains unpaid, we do allow our collection agency to perform Extraordinary Collection Action. This includes placing the below balance on your credit file and/or taking legal action.

22

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Financial Impact Analysis

• Financial Analysis done throughout project.

• Extending payment plan and securing payments with auto draft payments removed external loan management vendor
  – Prior: Bellin paid in full when patient took out loan
    • Pros: lower AR, increased cash flow
    • Cons: expense and full risk of program

  – Accurately predicted $500k annual expense savings and 1.5 AR Day increase

23

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Lessons Learned

24

Lessons Learned: Customer Voice

- Goal of project initially started with a goal to "make it easy to pay bills"
  - Eye opening feedback from patient: it's not easy

- Understand what you ARE and ARE NOT achieving

25

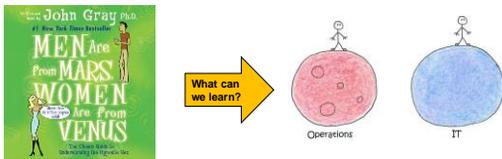## Lessons Learned: Bad Debt Process

Operations and IT don't always speak same language. Similar to:

26

Lessons Learned: Bad Debt Process

- Actual learning:
  - It is ok, different language but same goal. Find a common language
- Suggestion: BE VISUAL
  - Use flowcharts, use PowerPoints, use screenshots (statements)
- Groundbreaking point in project:

27

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Lessons Learned: Reporting

- Resolved accounts reporting

  - Key AR valuations process = resolved claims analysis

  - Higher self pay AR with increased time to resolve accounts = more lagging measure

  - Suggestion: develop payer scorecards to understand the correlations between total AR and the expected self pay portion

28

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Lessons Learned: Payment Plan Exceptions

- Develop automated process to manage exceptions

  - Do not rely on Post-It notes, excel, manually watching accounts =
    - Not sustainable
    - Errors will be made

- Suggestion: develop capabilities for manual intervention that the system managed
  - Example: patient flag allowing for different than standard payment plan terms

29

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Results

30

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Achievements

- Eliminated 500K net annual expense by managing self pay AR internally

- 100% of payment plans are auto-withdraw

31

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% of Patient Payments MyChart: Prior (Feb 2019)

Overall	Bellin PCP	Bellin Insured
14.2%	16.7%	37.1%

32

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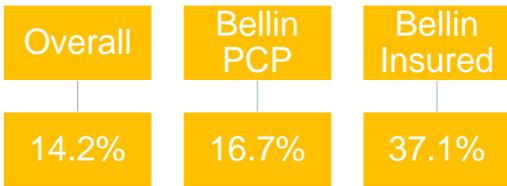
% of Patient Payments MyChart: After (Aug 2019)

Overall	Bellin PCP	Bellin Insured
33.2%	36.2%	56.6%

33

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Achievements

Revenue Cycle Focuses measured at every service line: POS and MyChart

Results of focused effort

34

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Presentation Learning Objectives

- Objective 1: Have considerations on how to make evidence based and patient centric revenue cycle decisions, and successfully implement the decisions
  - Identify goals and guiding principles of projects and stay true
  - Use your patients
  - United Way ALICE Living Wage Report
  - Use industry best practice sources (HFMA, A Bill You Can Understand)
  - Visual communication between operations and IT (use flowcharts to ensure consensus)
  - Test EHR rules to ensure system mimics policy (payment plans, bad debt, etc.)

- Objective 2: Have strategies revenue cycle can use to incentivize patients to activate EHR patient platforms (example: Epic MyChart)
  - Statements are a "free" advertising. Ensure they meet your patients needs and use them to incentivize EHR (Epic MyChart) adoption.
  - If self service is a goal: integrate self service prompts into phone calls

35

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Questions?

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36