



*Patient Financial Treatment
To Match Your Quality Care™*

DEFINITIVE GUIDE TO Patient Balance Management

itxcompanies.com



PRESERVE THE

Patient Relationship

Your patients are your most precious asset and they want simple payment processes as well as transparent billing.

In today's healthcare landscape, data and systems automation are critical pieces of the equation. Workflows and communication need to be strategic and appropriate for each client and patient demographic. No two patients are the same despite potential similarities. Developing a flexible process specific to your organization is important and will help ease your patients' concerns while also producing effective and highly engaging patient interaction.

Technology plays a critical role in the implementation of any effective patient balance management program. In addition to providing a platform for reciprocal communication, it also solidifies individual patient relationships. When creating these patient-based exchanges, consider these options:

1. Craft unique workflows which recognize the "outliers" ensuring that every account is worked
 - Group accounts in a more patient-friendly, simplified manner-such as at the guarantor level
 - Drill down to small balance write-offs
 - Deploy processes addressing specific events-i.e. unscheduled or missed payments
 - Self-pay vs. Balance after insurance
2. Consider cloud-based systems which alleviate the necessity of maintaining servers while also providing higher levels of security
3. Remain 100% PCI compliant-certified by using quarterly reviews to ensure adherence



4. Increase patient contact and engagement by using various technological contact tools such as dialers, mobile devices and portals
 - Maximize connection to the appropriate party by screening out unproductive activities (busy signals, answering machines)
 - Provide optional unattended messaging
 - Place priority on in-bound callers
 - Utilize patient advocates to speak directly with live callers
 - Record 100% of all calls
 - Check in on your advocates with remote listening for quality assurance
 - Implement “whisper” coaching ability to support actionable team development
5. Provide traditional written statements as well as e-statement options
6. Incorporate an on-line payment portal for 24/7/365 safe, consumer-driven choices
7. Use patient-centric strategies for account resolution
 - Recruit high EQ (Emotional Intelligence) talent
 - Screen potential candidates for job aptitude and appropriateness to position
 - Conduct background and substance testing
 - Provide in-depth training for all patient advocates prior to first engagement with patients and continuous on-going learning

PRACTICE

Active Engagement

You will increase your odds of on-time, complete payments when you rigorously pursue clear and measurable communication performance thresholds with each patient.

The value of a conversation with a live person simply cannot be overstated. Be available, provide direct access to patient advocates who can then work together with each patient to resolve any account concerns. We recommend setting this bar extremely high. The industry average for answering a telephone call is over five minutes, for example. Strive for an average under a minute as a minimum and reach for under 30 secs to provide exceptional levels of interaction.

30

**seconds or less
average speed
to answer**

industry average is 5-6 minutes

<2%

**call
abandon
rate**

industry average is ~9%

STRIVE FOR

Better Outcomes

All patient interaction presents the opportunity to build better outcomes, both clinically and financially.

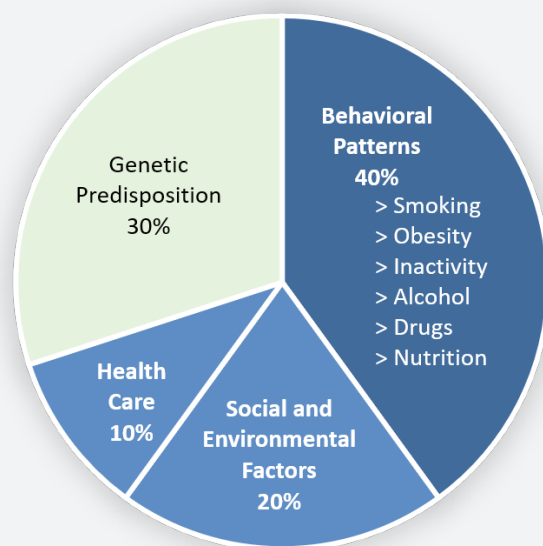
The most effective means of increasing revenue lies in the implementation of patient-centric advanced strategies and workflows. Specifically, engaging and measuring patient behavior and risk, regarding clinical and financial outcomes, provides a wealth of useful insights. You can reduce unnecessary patient readmission while also improving patient and clinical staff satisfaction.

40%

Of health utilization (cost) and outcomes are directly influenced by our behaviors

70%

Or more when considering the broader impact of behavior (overcoming social factors, genotype to phenotype)



Source: Schroeder, S. We Can Do Better – Improving the Health of the American People. New England Journal of Medicine. 2007.
<http://www.nejm.org/doi/full/10.1056/NEJMs073350#iid=f01>

MEASURE & ENCOURAGE

Patient Activation

Increasing the knowledge, skills and confidence of each patient helps transform them into effective managers of their healthcare.

ITx has partnered with Insignia Health to increase patient self-management and improve health outcomes through use of the Patient Activation Measure® (PAM®) survey and related tools. PAM was developed by health researchers at the University of Oregon to provide a quantitative assessment of each patient's knowledge, skills and confidence corresponding to typical health-related behaviors.[^]

PAM segments individuals into one of four activation levels that can help predict the likelihood of future ER visits, hospital admissions and readmissions, medication adherence and more. Hundreds of health-related characteristics are mapped to PAM levels, offering insight into each person's self-management abilities.* Our Measure – Align – Tailor process guides patient support to establish goals and action steps that are realistic and achievable.

MEASURE

Measure activation using PAM® every 4-6 months to assess improvement over time.

ALIGN

Align resources toward individuals lower in activation where the behavior change opportunity is greatest.

TAILOR

Tailor support based upon a person's self-management ability.

PAM ACTIVATION LEVELS*



LEVEL 1

Disengaged and Overwhelmed

Individuals are passive and lack confidence. Knowledge is low, goal-orientation is weak, and adherence is poor.

PATIENT PERSPECTIVE

"My doctor is in charge of my health."



LEVEL 2

Becoming aware, but still struggling

Individuals have some knowledge, but large gaps remain. They believe health is largely out of their control, but can set simple goals.

PATIENT PERSPECTIVE

"I could be doing more."



LEVEL 3

Taking action

Individuals have the key facts and are building self-management skills. They strive for best behaviors, and are goal-oriented.

PATIENT PERSPECTIVE

"I'm part of my healthcare team."



LEVEL 4

Maintaining behaviors and pushing further

Individuals have adopted new behaviors, but may struggle in times of stress or change. Maintaining a healthy lifestyle is a key focus.

PATIENT PERSPECTIVE

"I'm my own advocate."

Research studies show that static elements such as demographics and socio-economic factors only account for roughly 6% of the variation in PAM scores, meaning patient activation can easily change over time, which is good news. As activation increases, patient health behaviors improve:

- Understanding treatment options and care directions
- Taking medications as directed
- Managing health conditions and healthcare issues
- Partnering with care teams
- Seeking information to make informed choices
- Utilizing less unwarranted care
- Reporting higher satisfaction with care

Improving patient activation begins with use of Patient Activation Measure (PAM) to quantify an individual's self-management ability. The predictive power of PAM guides how best to tailor care pathways to the self-management ability of each individual, which in turn aligns the intensity and type of resource best suited to reduce health utilization and improve health outcomes. The key is integrating the measurement with your PHM strategy and deploying across EHR and care management platforms.

Allocating resources based on PAM level increases efficiency and limits the use of one-size-fits-all approaches that are often overwhelming to patients with low activation and unnecessary to patients with high activation.



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ITx is a leading company in healthcare revenue cycle focused exclusively on healthcare clients with Patient Balances. At the heart of all of our efforts, is our belief in our Patients, Not Debtors ITx Core Values™.

We provide concierge-style, patient balance resolution services for our hospitals and physician group clients. And, we do it with **100% U.S. domestic workforces.**

INTERESTED IN LEARNING MORE?
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