A/R Beachbody Bootcamp
“Slimming Down Your Receivables”

PRESENTED BY:

JEFF JOHNSON

KATHRYNE ROUSE

HAWES GROUP

Providence St. Joseph Health
Now…
a little about your coaches!
The Hawes Group
THE COMMUNITIES WE SERVE

Providence Health & Services
Alaska

Providence Health & Services
Western Washington, including Swedish Health Services and Pacific Medical Centers

Providence Health & Services
Oregon
Providence Health Plan

Providence Health & Services
Eastern Washington/Western Montana, including Kadlec Regional Medical Center

St. Joseph Health
Northern California (Humboldt, Napa, Sonoma Counties) including St. Joseph Heritage Healthcare

Providence Health & Services
Southern California (Los Angeles County), including Facey Medical Foundation

St. Joseph Health
Southern California (Orange and San Bernardino Counties) including Hoag and St. Joseph Heritage Healthcare

St. Joseph Health
West Texas/Eastern New Mexico, including Covenant Health and Covenant Medical Group FirstCare Health Plans
OUR SERVICES

50 HOSPITALS
829 CLINICS
23K PHYSICIANS
14 SUPPORTIVE HOUSING FACILITIES

106K CAREGIVERS
1.9m COVERED LIVES
90 NON-ACUTE SERVICES
HIGH SCHOOL, NURSING SCHOOLS AND UNIVERSITY

2 HEALTH PLANS
21b REVENUE
23m ADMITS/VISITS
$1.3b COMMUNITY BENEFIT

Providence St. Joseph Health
1: Learn what really drives the slimming of your A/R
2: Identify activities (workouts) that help slim down your A/R
3: Examples of successes and challenges other providers have experienced
5: Tools to create an action plan for your organization

“SLIMMING DOWN YOUR A/R”
TODAY’S OBJECTIVE

“SLIMMING DOWN YOUR A/R”
Slimming Down OUR A/R Requires Daily Workouts!

Important

- 10 jumping jacks
- 5 squats
- 5 push-ups
- 10 high knees
- 10 climbers
- 5 plank jump-ins
Word of Warning: As in all exercising, it is important to focus on multiple movements for overall all fitness and not focus too heavily on one movement.
What happens if we only work one muscle.
The New Patient Reality

- In the near future, patients will be responsible for 30% of their medical bills—and this growth isn’t likely to slow anytime soon.
- Healthcare providers are becoming the largest consumer creditors in the markets they serve—AND very few have the tools to be a bank.
- Providers have historically received only a fraction of what they’re owed.
- Rising patient bills require providers to offer more intensive customer support to help consumers navigate the new healthcare economy.
- 21st century healthcare providers must move beyond basic services like offering recurring payments, simple online bill pay, paper statements, and traditional dialer campaigns. They’re simply not enough.
How is the general healthcare system responding?

* Currently on [www.indeed.com](http://www.indeed.com) (job search engine), there are:

1. 5,471 positions for Insurance Follow-up Specialists posted by healthcare providers throughout the U.S.
2. 8,997 positions for Patient Account Representatives with a focus on patient collections and insurance follow-up.
New Patient Experience

It's never been more important to have a 360° view of the patient experience.
A/R Bootcamp Workout…

**Warm up:** 5 minute jog around what’s plaguing A/R today

**Circuit:**
- 10 Lunging steps with *Weighted Analysis*
- 5 Burpee *Communication* Requirements
- 15 *Insurance* sumo squat *Verifications*
- 10 minute best *Vendor Practices* plank holds
- 20 *AI & Machine Learning* Pull Ups
- 5 *Proper Coding* ring dips

[REPEAT]

**Cool Down:** 5 minute A/R stretching reduction
Beachbody Words of Wisdom

30% Gym
70% Diet

Ab’s are made in the kitchen, not in the Gym

©www.missfitclothing.com
A/R Beachbody Words of Wisdom

15% Analysis
15% Proper Coding
70% Proper Patient Engagement

Your organization’s AR Beachbody is made in your organization’s process flow and ability to clearly communicate expectations with the patient.
Why this workout is critical to our health...
The Significance of Low A/R Days
Some Important Industry Facts that Drive A/R Days

Time For A…
Survey Says:

Question 1: Out of eight (8) people, how many left a practice or healthcare system for another provider or different care in the last year?
Answer Is:

Answer 1: 1 in 8 patients left a practice or system in the past year.
Survey Says:

Question 2: Over the lifetime of a practice, what is the cost of losing a patient due to dissatisfaction?
Answer Is:

Answer 2: The loss of a patient due to dissatisfaction can result in a lost of $200,000 over the lifetime of a practice.

-$200,000

www.ncbi.nlm.nih.gov/pmc
Survey Says:

Question 3: Which generation is more likely to switch providers due to dissatisfaction in the next couple of years...Millennials, Generation X, or Boomers?
Answer 3: Generation most likely to switch providers due to dissatisfaction:

<table>
<thead>
<tr>
<th>Generation</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Millennials</td>
<td>42%</td>
</tr>
<tr>
<td>Generation X</td>
<td>44%</td>
</tr>
<tr>
<td>Boomers</td>
<td>20%</td>
</tr>
</tbody>
</table>
Survey Says:

Question 4: (True or False) Today’s patients expect the same customer service from their healthcare provider as they receive from their retail (Nordstrom) experience?
Answer Is:

Answer 4:

TRUE
Survey Says:

Question 5: What is the leading reason patients are slow to pay or do not pay their self-pay balances?
Answer Is:

Answer 5: The leading reasons self-pay balances go unpaid.

- Inability to Pay  21%
- Confusion  19%
- Patient Dissatisfaction  49%
- Other  11%

www.solutionreach.com
“Billy and I are playing doctor. So far, I’ve kept him waiting three hours.”
Key Exercise to Develop End-to-End Processes

Be Present to Be Effective

“A leader knows the magic is with the people he/she serves.”

~Walt Disney
What does ‘Be Present’ Mean?
An Example of Being Present
On a More Serious Note:
An Example of Being Present
Why is ‘Being Present’ Key to Developing Effective End-to-End A/R Processes?
When we make it difficult for our patients to understand healthcare finance, how can we expect them to pay us?

The administrative pain is worse than the injury or surgery.
Time for an Activity!
Remember...
It is about
‘REINFORCEMENT’
and not
‘enforcement’
The Personal Benefit of ‘Being Present’

If your job demands that you focus on an urgent task, you can stress out because you have a million other things to do and not enough time to do them. Or you can be present, and focus completely on that task, and now there is only that one task and you. When you’re done, you can move on to the next task.
One Final ‘Being Present’ Story...
A/R Bootcamp Workout...

**Warm up**: 5 minute jog around what’s plaguing A/R today

**Circuit**:
- 10 Lunging steps with *Weighted Analysis*
- 5 Burpee *Communication* Requirements
- 15 *Insurance* sumo squat *Verifications*
- 10 minute best *Vendor Practices* plank holds
- 20 *AI & Machine Learning* Pull Ups
- 5 * Proper Coding* ring dips

[REPEAT]

**Cool Down**: 5 minute A/R stretching reduction
Weighted Analysis
Warning: Human nature is to pass over important items that are familiar. Familiarity often breeds mindlessness.
What happens when our brains see things as common...
Even with data, sometimes our brains struggle processing things...
The first best practices tip is for you to take the time to analyze your accounts receivable.

1. This means that you look at every practice that’s put in place and examine it thoroughly.
2. You should also ensure that every procedure that’s put into place is something that is also put into writing.
3. You should examine how you run your A/R reports.
   • This is another difference between healthcare and other industries.
   • You should ensure that you run your reports in a way that separates out insurance and the patient. It’s really not just one single system.
   • You should, in essence, be running two. This also means that you should have two sets of policies.

“*It’s also the best way to know the patients.*“
A Real-Life Example of Weighted Analysis

- Daily A/R Reports by Region for Operational Review and Leadership Follow-up
  - Communicate Action Plans Based on Findings
- Monthly Revenue Cycle Report Out with each ministry’s CFOs.
  - (No Surprises)

* Executive Director of Customer Experience, Providence Health & Services
### Total Debit A/R:
$727,294,240

## CA HB Summary - June 2018
### Self Pay Month End Reporting

<table>
<thead>
<tr>
<th>Month</th>
<th>Total</th>
<th>Revenue</th>
<th>Uninsured</th>
<th>Regional</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jun-17</td>
<td>$784,528,913</td>
<td>$18,553,831</td>
<td>2.2%</td>
<td>2.2%</td>
</tr>
<tr>
<td>Jul-17</td>
<td>$828,953,119</td>
<td>$20,232,921</td>
<td>2.4%</td>
<td>2.4%</td>
</tr>
<tr>
<td>Aug-17</td>
<td>$869,085,741</td>
<td>$20,132,375</td>
<td>2.3%</td>
<td>2.3%</td>
</tr>
<tr>
<td>Sep-17</td>
<td>$883,425,588</td>
<td>$18,636,492</td>
<td>2.2%</td>
<td>2.2%</td>
</tr>
<tr>
<td>Oct-17</td>
<td>$873,562,162</td>
<td>$18,593,553</td>
<td>2.2%</td>
<td>2.2%</td>
</tr>
<tr>
<td>Nov-17</td>
<td>$864,426,101</td>
<td>$19,590,908</td>
<td>2.3%</td>
<td>2.3%</td>
</tr>
<tr>
<td>Dec-17</td>
<td>$884,815,053</td>
<td>$24,026,087</td>
<td>2.7%</td>
<td>2.7%</td>
</tr>
<tr>
<td>Jan-18</td>
<td>$933,542,359</td>
<td>$20,862,780</td>
<td>2.2%</td>
<td>2.2%</td>
</tr>
<tr>
<td>Feb-18</td>
<td>$884,324,403</td>
<td>$16,759,409</td>
<td>2.0%</td>
<td>2.0%</td>
</tr>
<tr>
<td>Mar-18</td>
<td>$932,945,375</td>
<td>$17,667,144</td>
<td>1.9%</td>
<td>1.9%</td>
</tr>
<tr>
<td>Apr-18</td>
<td>$947,709,196</td>
<td>$15,156,689</td>
<td>1.6%</td>
<td>1.6%</td>
</tr>
<tr>
<td>May-18</td>
<td>$988,020,266</td>
<td>$15,446,007</td>
<td>1.5%</td>
<td>1.5%</td>
</tr>
<tr>
<td>Jun-18</td>
<td>$847,545,831</td>
<td>$16,001,421</td>
<td>1.9%</td>
<td>1.9%</td>
</tr>
</tbody>
</table>

### Self Pay A/R:
**Goal is 10% or lower**

<table>
<thead>
<tr>
<th>Month</th>
<th>Amount</th>
<th>% of Total A/R</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jun-17</td>
<td>$562,833,912</td>
<td>8.4%</td>
<td>$784,528,913</td>
</tr>
<tr>
<td>Jul-17</td>
<td>$653,545,295</td>
<td>8.5%</td>
<td>$828,953,119</td>
</tr>
<tr>
<td>Aug-17</td>
<td>$614,604,196</td>
<td>8.6%</td>
<td>$869,085,741</td>
</tr>
<tr>
<td>Sep-17</td>
<td>$593,589,351</td>
<td>8.1%</td>
<td>$883,425,588</td>
</tr>
<tr>
<td>Oct-17</td>
<td>$576,628,494</td>
<td>7.7%</td>
<td>$873,562,162</td>
</tr>
<tr>
<td>Nov-17</td>
<td>$580,285,316</td>
<td>8.1%</td>
<td>$864,426,101</td>
</tr>
<tr>
<td>Dec-17</td>
<td>$561,945,126</td>
<td>8.1%</td>
<td>$884,815,053</td>
</tr>
<tr>
<td>Jan-18</td>
<td>$560,618,062</td>
<td>7.6%</td>
<td>$933,542,359</td>
</tr>
<tr>
<td>Feb-18</td>
<td>$566,116,616</td>
<td>8.0%</td>
<td>$884,324,403</td>
</tr>
<tr>
<td>Mar-18</td>
<td>$563,981,374</td>
<td>8.3%</td>
<td>$932,945,375</td>
</tr>
<tr>
<td>Apr-18</td>
<td>$562,109,777</td>
<td>8.3%</td>
<td>$947,709,196</td>
</tr>
<tr>
<td>May-18</td>
<td>$560,900,842</td>
<td>8.3%</td>
<td>$988,020,266</td>
</tr>
<tr>
<td>Jun-18</td>
<td>$560,850,018</td>
<td>8.4%</td>
<td>$847,545,831</td>
</tr>
</tbody>
</table>

### Guarantor Cash:
**Goal is 10% or higher**

<table>
<thead>
<tr>
<th>Month</th>
<th>Front End</th>
<th>Back End</th>
<th>MyChart</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jun-17</td>
<td>$1,487,545</td>
<td>$3,860,876</td>
<td>$554,272</td>
<td>$5,902,893</td>
</tr>
<tr>
<td>Jul-17</td>
<td>$1,586,514</td>
<td>$3,647,564</td>
<td>$565,283</td>
<td>$5,799,361</td>
</tr>
<tr>
<td>Aug-17</td>
<td>$1,639,131</td>
<td>$4,678,311</td>
<td>$577,807</td>
<td>$6,995,249</td>
</tr>
<tr>
<td>Sep-17</td>
<td>$1,503,325</td>
<td>$3,433,461</td>
<td>$484,100</td>
<td>$5,381,886</td>
</tr>
<tr>
<td>Oct-17</td>
<td>$1,466,508</td>
<td>$3,557,979</td>
<td>$622,427</td>
<td>$6,646,914</td>
</tr>
<tr>
<td>Nov-17</td>
<td>$1,421,682</td>
<td>$3,450,176</td>
<td>$626,936</td>
<td>$6,508,894</td>
</tr>
<tr>
<td>Dec-17</td>
<td>$1,201,044</td>
<td>$3,446,402</td>
<td>$660,978</td>
<td>$5,308,423</td>
</tr>
<tr>
<td>Jan-18</td>
<td>$1,431,539</td>
<td>$3,376,294</td>
<td>$721,877</td>
<td>$5,787,110</td>
</tr>
<tr>
<td>Feb-18</td>
<td>$1,165,673</td>
<td>$3,419,081</td>
<td>$682,413</td>
<td>$5,207,167</td>
</tr>
<tr>
<td>Mar-18</td>
<td>$1,607,206</td>
<td>$3,947,139</td>
<td>$894,052</td>
<td>$6,548,397</td>
</tr>
<tr>
<td>Apr-18</td>
<td>$1,410,214</td>
<td>$4,057,927</td>
<td>$837,892</td>
<td>$6,306,032</td>
</tr>
<tr>
<td>May-18</td>
<td>$943,237</td>
<td>$3,083,832</td>
<td>$759,613</td>
<td>$4,762,682</td>
</tr>
<tr>
<td>Jun-18</td>
<td>$1,128,864</td>
<td>$3,665,007</td>
<td>$814,371</td>
<td>$5,706,242</td>
</tr>
</tbody>
</table>

Front End pmts include any pmt posted within 7 days of the discharge date.

### Self Pay A/R Breakdown by Credit Score:

<table>
<thead>
<tr>
<th>Credit Score Range</th>
<th>Amount</th>
<th>% of Self Pay A/R</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Collectability</td>
<td>$243,313,301</td>
<td>40%</td>
</tr>
<tr>
<td>Uncollectable/Deceased</td>
<td>$7,512,637</td>
<td>12%</td>
</tr>
<tr>
<td>Current A/R (Not Scored Yet)</td>
<td>$22,066,680</td>
<td>36%</td>
</tr>
</tbody>
</table>

### Self Pay Liquidity:

- **Total Guarantors (##)**: 11,079
- **On Payment Plan**: 11,079
- **Not on PPA**: 11,079
- **Total**: 12,011

<table>
<thead>
<tr>
<th>Metric</th>
<th>On Payment Plan</th>
<th>Not on PPA</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of Total Guarantors (##)</td>
<td>8%</td>
<td>92%</td>
<td>92%</td>
</tr>
<tr>
<td>HAR Average Balance Paid</td>
<td>$963</td>
<td>$537</td>
<td>$1,500</td>
</tr>
<tr>
<td>HAR Average Age to A/R Zero Bal</td>
<td>285</td>
<td>71</td>
<td>356</td>
</tr>
</tbody>
</table>

### Guarantor Cash Aging by Self Pay Date:

<table>
<thead>
<tr>
<th>Payment Plans</th>
<th>Balance</th>
<th>% of Self Pay A/R</th>
</tr>
</thead>
<tbody>
<tr>
<td>271-955</td>
<td>$111,176,350</td>
<td>18%</td>
</tr>
<tr>
<td>Over 965</td>
<td>$553,027</td>
<td>6%</td>
</tr>
<tr>
<td>Amount</td>
<td>% of Total</td>
<td>Amount</td>
</tr>
<tr>
<td>$152,487</td>
<td>3%</td>
<td>$353,027</td>
</tr>
</tbody>
</table>

Financial Counseling:
- **Total Sponsorship**: $52,015,719
  - Inpatient Uninsured Only: $57,985,497
  - Revenue: $50,491,231
  - % Revenue: 35%

Liquidity factors in the activity on all accounts that reached a zero A/R balance during the month.

% Yield Represents the Guarantor Cash as a % of the Self Pay Referral Balance (Cash + BD + Charity)
<table>
<thead>
<tr>
<th>Month</th>
<th># of HAIs</th>
<th>Charity</th>
<th>% of Average (Prior 12 months)</th>
<th>Bad Debt</th>
<th>% of Average (Prior 22 months)</th>
<th>Charity - Bad Debt</th>
<th>% of Average (Prior 22 months)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jun-17</td>
<td>3,203</td>
<td>$5,277,489</td>
<td>100%</td>
<td>3,323</td>
<td>$3,576,684</td>
<td>104%</td>
<td>6,528</td>
</tr>
<tr>
<td>Jul-17</td>
<td>2,561</td>
<td>$7,648,088</td>
<td>99%</td>
<td>3,291</td>
<td>$3,246,603</td>
<td>98%</td>
<td>5,552</td>
</tr>
<tr>
<td>Aug-17</td>
<td>3,412</td>
<td>$8,236,625</td>
<td>110%</td>
<td>3,553</td>
<td>$4,247,903</td>
<td>124%</td>
<td>6,757</td>
</tr>
<tr>
<td>Sep-17</td>
<td>3,407</td>
<td>$10,152,364</td>
<td>105%</td>
<td>4,298</td>
<td>$4,674,857</td>
<td>131%</td>
<td>7,705</td>
</tr>
<tr>
<td>Oct-17</td>
<td>3,261</td>
<td>$9,202,903</td>
<td>93%</td>
<td>3,761</td>
<td>$5,078,943</td>
<td>139%</td>
<td>7,022</td>
</tr>
<tr>
<td>Nov-17</td>
<td>2,726</td>
<td>$24,971,143</td>
<td>244%</td>
<td>3,351</td>
<td>$5,540,733</td>
<td>55%</td>
<td>28,163</td>
</tr>
<tr>
<td>Dec-17</td>
<td>3,344</td>
<td>$50,440,607</td>
<td>486%</td>
<td>3,288</td>
<td>$3,457,449</td>
<td>92%</td>
<td>18,883</td>
</tr>
<tr>
<td>Jan-18</td>
<td>4,733</td>
<td>$11,518,915</td>
<td>82%</td>
<td>3,289</td>
<td>$3,430,606</td>
<td>115%</td>
<td>8,922</td>
</tr>
<tr>
<td>Feb-18</td>
<td>11,264</td>
<td>$24,528,285</td>
<td>171%</td>
<td>3,631</td>
<td>$7,477,576</td>
<td>217%</td>
<td>14,895</td>
</tr>
<tr>
<td>Mar-18</td>
<td>4,955</td>
<td>$10,479,108</td>
<td>88%</td>
<td>3,512</td>
<td>$5,942,402</td>
<td>101%</td>
<td>8,177</td>
</tr>
<tr>
<td>Apr-18</td>
<td>3,695</td>
<td>$8,056,059</td>
<td>59%</td>
<td>2,957</td>
<td>$5,250,925</td>
<td>84%</td>
<td>6,316</td>
</tr>
<tr>
<td>May-18</td>
<td>4,759</td>
<td>$10,661,813</td>
<td>69%</td>
<td>3,272</td>
<td>$4,974,825</td>
<td>129%</td>
<td>8,031</td>
</tr>
<tr>
<td>Jun-18</td>
<td>4,395</td>
<td>$9,921,258</td>
<td>64%</td>
<td>2,952</td>
<td>$3,911,282</td>
<td>97%</td>
<td>7,047</td>
</tr>
<tr>
<td><strong>Average</strong></td>
<td><strong>6,734</strong></td>
<td><strong>15,071,839</strong></td>
<td><strong>24%</strong></td>
<td><strong>3,423</strong></td>
<td><strong>4,006,599</strong></td>
<td><strong>57%</strong></td>
<td><strong>10,157</strong></td>
</tr>
</tbody>
</table>

### FA Medicaid No Auth Adjustments:
- **TotalCharity**: $9,277,489
- **Fin Assistance Medicaid No Auth**: $543
- **Grand Total**: $9,277,032

### Self Pay A/R Aging by Self Pay Date:

#### 0-90 Days
- **Payment Plans**: $1,999,324 (3.3%)
- **Uninsured not on PPA**: $11,567,246 (19.2%)
- **Rai After Ins not on PPA**: $18,488,854 (30.4%)
- **Total**: $32,555,443 (52.8%)

#### 91-120 Days
- **Payment Plans**: $1,561,890 (2.1%)
- **Uninsured not on PPA**: $1,627,248 (2.7%)
- **Rai After Ins not on PPA**: $5,918,069 (6.1%)
- **Total**: $8,504,631 (14.0%)

#### 121-180 Days
- **Payment Plans**: $1,982,710 (3.3%)
- **Uninsured not on PPA**: $2,597,213 (4.3%)
- **Rai After Ins not on PPA**: $5,935,766 (3.2%)
- **Total**: $8,310,500 (13.7%)

#### Over 365 Days
- **Payment Plans**: $2,761,287 (4.5%)
- **Uninsured not on PPA**: $461,453 (0.8%)
- **Rai After Ins not on PPA**: $1,583,475 (2.7%)
- **Total**: $5,255,057 (8.6%)

### Charit A/R Aging by Self Pay Date:

#### 0-90 Days
- **Payment Plans**: $6,067,983 (61%)
- **Uninsured**: $436,094 (15%)
- **Total**: $6,454,077 (61%)

#### 91-120 Days
- **Payment Plans**: $1,453,010 (15%)
- **Uninsured**: $589,404 (23%)
- **Total**: $2,042,414 (15%)

#### Over 365 Days
- **Payment Plans**: $629,567 (6%)
- **Uninsured**: $5,203,732 (22%)
- **Total**: $6,624,303 (20%)

### Bad Debt Transfers Aging by Self Pay Date:

#### 0-90 Days
- **Uninsured**: $82,048 (2%)
- **Balance After Insurance**: $79,212 (2%)
- **Total**: $161,260 (4%)

#### 91-120 Days
- **Uninsured**: $28,350 (1%)
- **Balance After Insurance**: $106,481 (3%)
- **Total**: $134,831 (4%)

#### Over 365 Days
- **Uninsured**: $895,084 (11%)
- **Balance After Insurance**: $478,926 (21%)
- **Total**: $2,411,254 (100%)
IT’S VERY EASY TO GET EXCITED ABOUT DATA…EVEN STUCK NEEDING MORE AND MORE INFORMATION.

BUT ACTION DOESN’T HAPPEN IN DATA, SPREADSHEETS OR WORK INSTRUCTIONS.

“I’ve never seen data or work instructions jump off of a page and lead people.”

~ Jeff Johnson – CMO
Hawes Group~
Communication
Burpee Communication Tips

Burpee was designed by a PHD Dr. Burpee as a measure of health fitness.

**WHAT IS OUR LEVEL OF FITNESS IN COMMUNICATING EXPECTATIONS THROUGHOUT THE A/R CYCLE?**
It’s critical that providers have excellent communication with their patients about A/R practices and expectations from the initial encounter through to the end.

1. Patients should understand your billing, how and when they should pay, and who they should contact if they have questions.
2. Providers should provide this information in writing that is easy to understand.
3. Your front office employees and physicians should also know the policies and know how to explain them and be able to answer basic questions.
   * These are the people that your clients interact with the most. They should be able to provide answers.
When we make it difficult for our patients to understand healthcare finance, how can we expect them to pay us?

The administrative pain is worse than the injury or surgery.
Some helpful communication exercises to keep in mind.
To effectively perceive others, identifying communication styles is key...

- Communication:
  - Types of Communication:
    - Verbal
    - Non-Verbal
    - Written

*We communicate almost non-stop throughout our day and so we often take for granted that we are doing it well.*
In Regards to the Verbal

• Remember:

We don’t just speak words. Our voices are sophisticated instruments…and we use them to send many signals about how we are feeling and thinking.

Example...

You walk into a conference room and the boss says, “Look who’s here.”
The Power of a Voice to Influence
Our ‘Body Language' is our strongest avenue for communication.

Body Language helps us understand others and plays five critical roles in our communication....
5 Critical roles of ‘Body Language’:

1. **Repetition:** Repeats the message the person is making verbally.

2. **Contradiction:** Can contradict a message the individual is trying to convey.

3. **Substitution:** Can substitute for a verbal message...i.e. eyes express without words.

4. **Complementing:** Can add to (complement) a verbal message.

5. **Accenting:** Can underline a verbal message...i.e. pounding a table.
10 Body Positions and Gestures that Can Improve Your Performance

Sure, you control your body. But your body can also control you. Simple gestures, simple postures -- each can make a dramatic impact on how you think, feel, and act. Best of all you don't have to be a yogi or athlete -- you can just be you. Only now you will be a better you.
Oddly enough, crossing your arms will make you stick with an “unsolvable” problem a lot longer – and will make you perform better on solvable problems. Which is definitely cool, because persistence is a trait most successful entrepreneurs possess in abundance.

Whenever you feel stuck, try folding your arms against your torso. Who knows what solutions might result?
Gain Willpower by Tensing Your Muscles

- You know how you instinctively stiffen before you get a shot? That’s your body’s way of trying to minimize pain.
- Flexing your muscles also helps you stay more focused when you hear negative information.
- Flexing can even increase your ability to resist eating tempting food.
According Australia National University professor Dr. Darren Lipnicki, lying down can lead to creative breakthroughs. “It might be that we have our most creative thoughts while flat on our back,” he says.

One reason might be that more of the chemical noradrenaline is released while we’re standing, and noradrenaline could inhibit our ability to think creatively.

Now you have a great excuse to lay back and think.
According to Harvard professor Amy Cuddy, two minutes of power posing -- standing tall, holding your arms out or towards the sky, or standing like Superman with your hands on your hips -- will dramatically increase your level of confidence.

Try this one before you step into a situation where you know you'll feel nervous, insecure, or intimidated. (Just make sure no one is watching.)
Smile to Reduce Stress

- Frowning, grimacing, and other negative facial expressions signal your brain that whatever you are doing is difficult.
- Your body responds by releasing cortisol, which raises your stress levels. Stress begets more stress and in no time you're a hot mess.
- Here’s the cure: make yourself smile.
  - You’ll feel less stress even if nothing else about the situation changes.
  - And there’s a bonus: when you smile other people feel less stress, too. Which, of course, will reduce your stress levels.

*Go ahead: kill two stresses with one smile.*
Bow Slightly to Put Yourself at Ease

- Inclining your head forward slightly when you meet someone shows deference and humility and helps remove any perceived differences in status.
- The next time you meet someone, tilt your head forward slightly, smile, make eye contact, and show you are honored by the introduction.
- We all like people who like us. If I show you I'm genuinely happy to meet you, you'll instantly start to like me. And you'll show that you like me, which will help calm my nerves and help me be myself.
Mimic Others to Understand Their Emotions

• Sounds strange, but research shows that imitating other people’s nonverbal expressions can help you understand the emotions they are experiencing.
• Since we all express our emotions nonverbally, copying those expressions affects our own emotions due to an “afferent feedback mechanism.”
• In short: mimic my expressions and you’ll better understand how I feel – which means you can better help me work through those feelings.
• Plus mimicking facial expressions (something we often do without thinking) makes the other person feel the interaction was more positive.
Take an Angle to Reduce Conflict

- When tensions are high standing face to face can feel confrontational. When what you have to say may make another person feel challenged, shift your feet slightly to stand or sit at an angle.
- And if you're confronted don't back away. Just shift to that slight angle. You’ll implicitly reduce any perceived confrontation and may make an uncomfortable conversation feel less adversarial.
Talk With Your Hands to Improve Clarity

- Think about how you talk and act when you're comfortable. Say you’re telling a story at a party. You use your hands naturally. The right gestures add immeasurably to your words.
- Act the same way when you're in professional situations. Using your hands when you speak will help you feel more confident, think more clearly, more naturally punctuate certain words and phrases, and fall into a much better rhythm.
- Loosen up and don’t think about your hands. Just let them go. The impact on your words will be dramatic.
Use Your Hands to Improve Retention

- Research shows requiring children to speak while they learned had no effect on solidifying learning – but requiring them to gesture while learning helped them retain the knowledge they had gained. If it works for kids… it will work for us, too.

- According to one researcher, “Gesturing can thus play a causal role in learning, perhaps by giving learners an alternative, embodied way of representing new ideas.”
Chew Gum to Feel More Alert… and In a Better Mood

• Okay, so chomping on a wad of gum may not look particularly professional.
• Still, a number of studies show chewing gum can make you more alert.  
  • And improve your reaction times.
  • And improve selective and sustained attention.
  • And improve your disposition.
Final Thought…

The next time you need to solve a difficult problem:

- Lie down
- Cross your arms
- Pop in a stick of gum.

Maybe, just maybe, that is the winning combination we all need to achieve our next breakthrough.
Remember...

30% of all communication fails.

“I love you just the way you are when you’re not being just the way you are.”
Breaking Down Communication

• 10% - The Words We Say

• 30% - The Sound of Our Voice

• 60% - Our Non-Verbal
Let's look at some factors affecting communication!

A QUICK OVERVIEW...
Time for an Activity!
Did you know…?

We are almost 100% effective in communicating when we are angry (non-verbal and verbal tends to match).
Did you know…?

“Hint Dropping” is the worst form of communication.
Did you know…?

Men & Women communicate differently due to physical make-up (always some exceptions)

**FACT:** Women (in general) speak 40% more words a day than men.
A Great Explanation of How Men & Women Differ
Did you know…?

Our home environments make us all communicate differently!
Our GENERATION affects our method of communication!

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>The Future</td>
<td><em>Is Ours!</em></td>
<td><em>Sucks!</em></td>
<td>The end is near!</td>
</tr>
<tr>
<td>Television</td>
<td>Bonanza</td>
<td>Cosby / Cheers</td>
<td>Jerry Springer</td>
</tr>
<tr>
<td>Money</td>
<td><em>I’ll earn it!</em></td>
<td><em>I don’t care that much about it!</em></td>
<td>You owe me!</td>
</tr>
<tr>
<td>Heroes / Role Models</td>
<td>Men of Character</td>
<td>Men &amp; Women of Character</td>
<td>What’s character?</td>
</tr>
<tr>
<td>Kids Killing Kids</td>
<td>Unthinkable</td>
<td>Isolated</td>
<td>Rampant</td>
</tr>
<tr>
<td>Parents</td>
<td>Try to please them.</td>
<td>Try to put up with them.</td>
<td>Aren’t around much.</td>
</tr>
<tr>
<td>Politicians / CEOs</td>
<td>Role Models</td>
<td>Suspicious of them</td>
<td>They’re all liars and criminals</td>
</tr>
<tr>
<td>Technology</td>
<td>Naive</td>
<td>Aware</td>
<td>Experienced</td>
</tr>
<tr>
<td>Change</td>
<td>Dislike</td>
<td>Accept</td>
<td>Demand</td>
</tr>
<tr>
<td>Respect for Elders</td>
<td>Automatic</td>
<td>Give cautiously</td>
<td>Only if you respect me first!</td>
</tr>
<tr>
<td>Employment</td>
<td>Hard to find</td>
<td>I can find work if I network</td>
<td>Jobs were a dime a dozen.</td>
</tr>
<tr>
<td>Loyalty to Employer</td>
<td>I can work my way to the top.</td>
<td>This could lead to better things</td>
<td>Give me Saturday off or I quit</td>
</tr>
<tr>
<td>Career Path</td>
<td>Keep nose to grindstone</td>
<td>Keep my options open</td>
<td>Keep changing jobs to build resume</td>
</tr>
</tbody>
</table>

Source: Eric Chester, *GENERATION WHY?*
A GENERATIONAL MOMENT
Did you know…?

Your personality type tends to dictate your method of communication.
Easier to Identify Personalities
Personality Types

- If you circled G and the D, you lean towards being a director:

  - Strengths: Administration, Taking Initiative
  - Weakness: Impatient, insensitivity
  - Irritation: Indecision
  - Goals: Productivity, Control
  - Fear: Being hustled.
  - Motivator: Winning
Director Example Statements

“Tell him I want to talk to him ASAP.”
“Let’s get this settled right now.”
“What’s the bottom line.”
“Cut to the chase: What are the options.”
“Here’s how we’ll proceed.”
“I want to win this battle – no ifs, ands, or buts.”
“Tell me what the goal is.”
“You handle it–but keep me informed.”
Personality Types

• If you circled O and the D, you show many qualities of a Socializer:

  • Strengths: Persuasion, interacting with others
  • Weakness: Disorganization, carelessness.
  • Irritation: Routine
  • Goals: Popularity, applause.
  • Fear: Loss of prestige.
  • Motivator: Recognition.

The Platinum Rule by Tony Alessandra and Michael J. O'Connor
Socializer Example Statements

“Hey, here’s an idea! Whattaya think?”
“Why don’t you noodle on that concept for a while.”
“I feel this is the way to go.”
“Tell me what you think.”
“I think we’re making good progress. Now let’s…”
“My sense is that…”
Harder to Identify Personalities
Personality Types

- If you circled O and the I, you are predominantly a Relater:
  - Strengths: Servicing, listening.
  - Weakness: Oversensitivity, indecision.
  - Irritation: Insensitivity
  - Goals: Acceptance, stability
  - Fear: Sudden change.
  - Motivator: Involvement.
Relator Example Statements

“I’d like to go kinda slow on this. Is that okay?”

“Have we determined the impact of this on the staff?”

“I’m not sure yet about that change.”

“I’d like to help you however I can.”

“We can work this out. I’m sure.”

“How do you really feel about this?”
Personality Types

• If you circled G and the I, you have lots of Thinker characteristics:

  • Strengths: Planning, analyzing.
  • Weakness: Perfectionistic, overly critical
  • Irritation: Unpredictability.
  • Goals: Accuracy, thoroughness.
  • Fear: Criticism.
  • Motivator: Progress.

The Platinum Rule by Tony Alessandra and Michael J. O’Connor
Thinker Example Statements

“Now, let’s look at this logically.”
“Is that really the right thing to do? Can we justify that?”
“Give me all of the facts first.”
“What guidelines make sense for this project?”
“I don’t want any surprises.”
“Have we touched all the bases?”
BEWARE
OF
MIXED BREEDS
Mixed Breeds Identified:

- Directing Director … “The Commander”
- Socializing Director … “The Adventurer”
- Relating Director … “The Producer”
- Thinking Director … “The Pioneer”
- Socializing Socializer … “The Entertainer”
- Directing Socializer … “The Enthusiast”
- Relating Socializer … “The Helper”
- Thinking Socializer … “The Impreser”
Mixed Breeds Identified:

- Relating Relater … “The Servicer”
- Directing Relater … “The Go-Getter”
- Socializing Relater … “The Harmonizer”
- Thinking Relater … “The Specialist”
- Thinking Thinker … “The Analyst”
- Directing Thinker … “The Mastermind”
- Socializing Thinker … “The Assessor”
- Relating Thinker … “The Administrator”
Time for an activity!
Changing demographics: Millennials

- Millennials: 1/3 of work force
- 65% could not afford $1000
- 54% have delayed care
- Most likely to seek information online
- Most likely to dispute bill
- Most choose HDHP
Best Communication Practices – Initial Engagement

✓ Someone to respond immediately
  ✓ Consider upping your staff and lunchtime and other peek patient times
✓ Flexibility on how to schedule an appointment and communicate (use new technology)
✓ Immediate communication on provider expectations
✓ Include all necessary documentation upfront (avoiding the Walgreen’s experience)
✓ Provide cost and payment expectations immediately
✓ Include information on who to contact with questions
A Personal Experience...
Personal Experience Continued...

Your Co-Pay was not paid at time of service. Please remit payment.
Personal Experience Summarized…

• Received Two Statements for my $20 co-pay three (3) months after my visit
• Healthcare System hit national news with layoffs due to slow ‘cash flow’.
• Only payment option on statement was to call or mail payment or go online for a charity review
• Was on hold as “Next Caller in Queue” for 45 minutes and 6 seconds
• Upon completing my payments, I was informed that they would be mailing me a receipt.
  • When asked if they could just email me the receipt, I was told, “It is our policy that receipts get mailed.”
• Pretty sure the healthcare system will spend in mailing costs and time (no to mention my time) more than $100 to collect my $20 that I offered them at time of service.
• AND…they created a very dissatisfied consumer.
Best Practices – Initial Billing

✓ Ensure that bill is easy to understand and that insurance data has been collected
✓ Include insert in bill offering payment options, financing, or terms
✓ Send first bill as soon as possible -- don’t wait for monthly cycle
✓ Provide discounts for payment in full
✓ Include modern payment options and online chat, not just a phone number to call with questions

Provide Patient Payment Options

✓ Payment of co-pay or deductible in full
✓ Installments offered by health system (Allowing more than four installment plans subjects you to Fair Credit Reporting regulation.)
✓ Financing offered by third party
  • 34% of patients say they would delay care if financing were not an option (Becker’s Hospital Review September 2016)
  • 94% of patients would take advantage of patient financing if it were offered as an option (HealthFirst Financial Participant survey April 2016)
  • 91% of participants said healthcare is an expense that requires more than 12 months of financing (Becker’s Hospital Review September 2016)
Insurance Verification
Insurance verification is one of the most important parts of your accounts receivable process.

1. It’s just as important for you as a provider as it is for your patient.
2. When insurance verification takes place in advance of any scheduled procedure or appointment, it protects your AR and your patient’s financial status. There are no surprises.
3. If insurance cannot be verified, providers know that they can protect the AR by speaking with the patient before the procedure.
   • They can either come up with a way to pay in cash or they can work out any issues that may arise with their insurance company.
Patient Financial Clearance is KEY

- Partnering with Central Access Services making pre-service outreach calls
- Educate
- Provide Quote / Estimate
- Collect
Best Vendor Practices
Did you know that medical bills are one of the biggest causes of bankruptcy in the United States? Medical bills are also one of the most common bills sent to collections.

1. There are some things that you can do to make collecting easier.
   - First, always verify personal information for patients when they come in for an appointment.
   - Next, consider what’s worth sending to your financing, early out and/or collections vendors and what’s not.
     - Determine an amount of money that is worth collecting on.
2. Another way you can reduce the amount of delinquent accounts is to enforce that payments must be made at the time that services are rendered.
3. Hire a company that has experience with collecting on past due medical bills. It can be up to 40% cheaper to hire an outside agency to perform your receivables. It also enables your staff to focus more on the patients and their needs.
4. Remember that 21st Century Collections is not what it used to be.
Best Practices – Aging accounts

✓ Send a reminder bill
✓ The more options you have for aging accounts, the more empathetic your healthcare system will seem
✓ For patients with outstanding balances and non-urgent medical needs (refuse to schedule new appointment until payment plan is established).
✓ Ensure payment arrangements are made before scheduling a new appointment.
New approach
Best Practices – Early Out Vendor

✓ Fully Compliant
✓ Automated systems / State-of-the-art technologies
✓ Access to call recording/speech analytics
✓ Strong skip-tracing abilities to enhance patient connections
✓ A true extension of your business office in all ways
Best Practices – Collections

✓ FDCPA compliant
✓ No legal threats – drives complaints
✓ Access to call recording/speech analytics
✓ Analysis to determine ability + propensity to pay
✓ Accounts removed from credit reporting once paid
✓ Is deploying the latest technology, including texting and other cutting edge options
Artificial Intelligence and Machine Learning
AI and Machine Learning Pull-Ups

Changing healthcare’s entire body by strengthening the patient’s experience through innovative methods.
Take Advantage of What Exists

Today’s consumers are already using technology in all other areas of their lives. Today’s patients require many different methods of interaction and communication with the healthcare providers / system. These include:

- IVR (Integrated Voice Response) Systems with 24x7 account management access
- Mobile Apps that have all of the flexibility of speaking with a human
- Easy websites with videos and tutorials in all necessary languages
- Payment Plan options for Self-pay balances starting at registration and continuing throughout the patient’s care experience
- Telemedicine options (shopping at home for their healthcare)
Some Fun Facts:

86% of consumers who have access to online portals use these platforms for some or all of their communication with their healthcare provider, while 91% will use mobile apps when they’re available.

80% of customers who have communicated real-time via a mobile app prefer this method to a traditional office visit.

* Image source West Monroe Partners
Artificial Intelligence Helping to Drive Patient Satisfaction

$49.00
Interesting Telemedicine Facts:

- It is the NEW focus of the Healthcare IT field
- In 2018 more than $15 Billion will be invested in Telemedicine in the US.
- It is effective for treating chronic conditions like diabetes, irritable bowel, multiple sclerosis affecting 133 Million people in the US (40% of the US Population)
- In 2017 the Veterans Administration lowered in-hospital admissions by 19% using telemedicine.
- Over 7 Million People have used telemedicine over the past year.

* Chiron Health Nov. 2017
Improved Engagement Through Science & Analytics
Patient Technology is Already Abundant

Fingertip Pulse Oximeter $18

Pocket EKG Monitor $129

Blood Pressure Monitor Cuff $34

Hip Knee Replacement Kit $29.95
Proper Coding & Management of Denials
Proper Coding ring dips

Strengthening your upper body to power through challenging denials.
Proper coding of patient visits, tests, diagnoses, and treatments is an incredibly important part of the healthcare accounts receivable.

1. Coding appropriately can help ensure that you document every billable aspect of your practice.
   - You are the one who will ultimately be responsible for its accuracy.
2. Make sure staff is strained on MACRA / MIPS and value based care models to maximize reimbursement.
3. Proper coding is directly related to the accuracy of your accounts receivable. It helps determine when you will get paid if your patient has insurance.
4. Denials: Timeliness of challenging billing discrepancies is key
5. Remember: The longer a medical bill goes unpaid, the harder it is to collect on it.
   - Proper coding keeps aging to a minimum.
A Real-Life Example of Proper Coding & Denials Management Impact

• Providence has started a strong practice of taking payers to court on denials due to confidence in their coding.
  • Have 4 open filings
  • Have won two
  • Have identified several others

* Director of Reimbursement and Recovery, Providence Health & Services, Oregon HFMA Winter Conference
Denial Prevention Work

- Scripting/automated process to recheck eligibility information against health plan website prior to billing. Catch errors before claim drop
- Prebilling reports to check for missing or invalid authorization
- High dollar NICU coverage check prior to billing
  - Automated claim statusing, confirming claim on file, noting epic with status, delaying follow-up (deferring WQ touch) or if not on file escalate for immediate follow-up, if denial anticipated escalate to denial WQ.
  - Consolidated denial team. work sorted by denial reason rather than by payor
  - Access team automated eligibility checks at registration and enforcement of minimum data set – required data for scheduled services including demographics and authorization.

Focus has been on scripting/automation strategies that will help populate necessary data allowing staff to focus on fewer problem accounts.

* System Director Acute Billing & A/R, Providence Health & Services
1. Become Present in your Patient’s experience so that you can ensure workflows are appropriate for the best patient experience.
2. Live in Reality: Slimming down our A/R takes time and vigilance.
3. Stay focused on the key exercises that keep our core A/R slim:
   - Weighted Analysis
   - Meaningful Patient Communication
   - Efficient and Effective Insurance Verifications
   - Best Collection Vendor Partnership
   - AI and Machine Learning Adoption
   - Proper Coding
4. [Repeat] Stay engaged and know that there will always be work to do to ensure our A/R remains slim in this ever changing healthcare environment.
A Final Activity…

Seeing the workout in action…
Enjoying the RESULTS
“SLIMMING DOWN YOUR A/R”
A Special Gift from Us to You...

Giving you that extra hand to manage all of the work in front of you!
THANK YOU

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