

PATIENT FRIENDLY BILLING[®]

Accessibility of Data Report

Objective: Establish standards to ensure data accessibility that maximize service to patients and families using best-practice processes and the latest telephone and information system technology while acknowledging that many healthcare organizations may take several years to implement advanced technology.

Patients often express concern about the difficulty in getting their questions answered efficiently. Patients frequently become frustrated as they try to navigate complex healthcare systems in search of a person who can answer all of their questions. They also are concerned that the organization's staff members do not have access to correct information to assist the patient and have not been adequately trained to know where to find those answers within their own organization.

From the providers' perspective, especially in larger organizations, no one department or person can or should be able to address all of the patients' questions. The constant changes in billing information present a challenge to providers to keep the billing staff current. It would be inappropriate to have less-qualified nonbilling personnel confuse or mislead patients in an honest effort to assist. Likewise, it would be inappropriate for billing personnel to try to fill prescriptions.

Ideally, consumers should be able to find a significant amount of information through:

- ***PATIENT FRIENDLY BILLING***[®]
- Internet automation through the master web page
- Telephone protocols

Patient Friendly Billing

The Patient Friendly Billing project is a collaborative effort, led by HFMA, to create a more patient-focused and friendly healthcare billing and collection process. When communicating with consumers, healthcare organization staff should avoid using industry abbreviations, numerical codes, and other jargon. Instead, staff should use easy-to-understand language. For more information, visit www.patientfriendlybilling.org.

Internet Automation through the Master Web Page

By automating its web site, a healthcare organization will provide consumers with a convenient way to access information or communicate with the organization. Internet automation can allow patients to:

- Request an appointment
- Submit information before the date of the appointment
- Receive an appointment reminder
- Update registration or insurance information
- View bill
- Check payment status
- Make a payment

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- Identify the person assigned to his or her account, and send that person an e-mail message
- Link to medical education
- Participate in surveys, such as patient satisfaction or market research.

As with communications in person or over the telephone, information stored on the Internet must be secured. The patients should be told that any information they provide will be treated confidentially.

Telephone Protocols

Telephone protocols should ensure that patients can always reach a staff member who is trained to triage the call as described below at any point in the telephone system.

The Patient Friendly Billing Task Force recommends that an organizational best-practice approach begin with a self-audit to assess the current state.

A one-physician office may have one staff person and one phone number for patients to call for all their needs. In larger organizations, however, an information accessibility matrix (IAM) should be developed. At the top of the IAM hierarchy would be the primary telephone number that enables patients to reach the right party to have their questions answered. Using a telephone decision tree, patients would be able to reach the other IAM numbers by selecting and keying the proper response. The master telephone number and the IAM should be communicated to all staff within the organization, replicated on the telephone decision tree, and printed on all literature, including bills, ads, and the organization's web page. The number should be printed in the major languages that are represented in the community. In addition, common conversations should be scripted, such as how to get a referral authorization and what information patients need to bring with them.

When patients reach the wrong area, the staff needs to stay on the line with them until they are connected to the correct person who can address their issue. Alternatively, if the telephone system is not sophisticated enough to manage multiple-party conferencing, the employee should give patients the correct telephone number for future reference and offer them the option of calling that number or giving the employee their number and having someone who can address their issue call them. Providers should measure whether or not patients are satisfied with the timeliness and accuracy of the responses to their requests.

An example of an IAM follows:

Information Accessibility Matrix

One master web address	www.ajax.com
Master or main telephone number	123-456-0000
Schedule an appointment (List all sites)	123-456-0001

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Prescription refill	123-456-0002
Tests results	123-456-0003
Referral authorization	123-456-0004
Patient complaints	123-456-0005
Billing questions	123-456-0006
Past due accounts	123-456-0007
Record release	123-456-0008
Employment	123-456-0009
Compliance hot-line	123-456-0010

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