## Putting the Patient Friendly Billing Vision into Practice

he Patient Friendly Billing project's 2006 report, Consumerism in Health Care—Achieve a Consumer-Oriented Revenue Cycle, exposed radical changes for the experience of the patient in 2011.

How close is anyone today to achieving this vision? In many ways, Geisinger Health System, an integrated healthcare delivery system with headquarters in Danville, Pa., has stepped up to the challenge. Practices listed below, observed in 2009, show great strides toward realizing this "future" patient experience.

## "Jack" visits his internal medicine physician to follow up on a sinus infection.

Patient Friendly Billing Vision	Geisinger Practice
MORNING	
Jack makes this appointment using his physician's secure web site.	Geisinger offers on-line appointment scheduling capability, patients can request and/or make their appointment online via MyGeisinger.org.
Jack updates his medical file with a description of the symptoms from his persistent sinus problems.	Patients can view their medical history on-line, and submit concerns to their physicians online. Symptoms cannot be added at this time.
Jack also updates his insurance and address information on file.	Patients can update demographic information (address, phone, e-mail) and submit insurance updates via e-mail. Patient self-service to update insurance coverage is not yet available.
When scheduling the appointment, Jack receives an electronic message that he will be responsible for a \$40 copay for the visit.	MyGeisinger.org does not provide the patient with a display of copay due when scheduling the appointment via MyGeisinger.org. Patients are presented with estimated copayment amounts when they view their upcoming appointments. Patients are able to price their services on-line using Geisinger's "Cost Care Estimator."
After Jack's exam, his physician determines that he does have a sinus infection and needs an antibiotic. She checks Jack's medication history through the electronic health record (EHR).	Geisinger's integrated EHR is available throughout the health system and allows all providers involved in Jack's care to see his medical history.
The EHR alerts the physician to a potential adverse medication interaction.	$EHR\ has\ alerts\ built\ into\ the\ system\ for\ adverse\ medication\ interactions.$
The EHR recommends generic alternatives.	$EHR\ has formularies\ built into\ the\ system\ that\ alert\ the\ physician\ to\ generic\ alternatives.$
The EHR details pharmacy costs for the drug.	Pharmacy costs are not available in the EHR.
The physician sends an e-prescription to the pharmacy.	All prescriptions are sent via e-prescription to the patient's pharmacy of choice.
The physician documents Jack's medical exam in the EHR, and orders a sinus CT scan and a follow-up visit. Before leaving the physician's office, Jack uses a kiosk to schedule the sinus CT scan that evening at the hospital.	Patient self-scheduling is not available on kiosks at the present time. However, staff can schedule follow-up, ancillary, and specialty appointments on-line at any time.
When scheduling the appointment, Jack receives driving and parking instructions.	Patients receive a summary of future services and locations. Patients also receive reminders of future appointments with driving and parking instructions (reminders are available electronically to the patient's e-mail address if this is a preferred method of communication); if the patient views the appointment in MyGeisinger.org, there are driving and parking directions provided to the respective service area.
Jack also receives information about what to expect during the CT scan during scheduling.	When an appointment is scheduled (at point of check out or otherwise), the patient is provided with instructions and information on what to expect. This is also followed up with patient instructions that accompany the appointment reminder notice sent to the patient's home (or electronically if that is the communication method of choice).
Jack also receives an estimate of the amount he is expected to pay at the time of the CT scan during scheduling.	Estimates are provided to patients via the pre-financial clearance process in advance of the appointment date.

Patient Friendly Billing Vision	Geisinger Practice
AFTERNOON	
When Jack arrives that evening at the hospital to register, the receptionist greets him by name. She recognizes him from her screen, which shows photographs of all patients registered for procedures.	Geisinger has the technology infrastructure to do this and is evaluating deploying this functionality in light of the Red Flag rules.
The hospital's information system automatically re-verifies his eligibility, benefits for the procedure ordered, deductible status, and copay.	This is currently in place via Geisinger's EHR, which is integrated with the electronic insurance eligibility application. All scheduled events are checked in advance of visit—all others are verified same day.
After Jack's CT scan, the radiologist checks his notes, which were entered via automated speech recognition software from his dictation as he reviewed Jack's scan.	Not available at this time.
He steps into Jack's room to give him the preliminary results of the scan.	This is currently available with EHR.
He electronically sends a follow-up note to Jack's physician.	This is currently available with EHR.
He electronically signs the health record.	This is currently available with EHR.
The actions automatically post to the physician and hospital billing systems.	This is currently available with ancillary information systems.
The insurance claims are sent in real time to Jack's health plan.	Electronic insurance claims generate two days post patient visit.
Diagnosis and procedure coding is validated consistent with EHR documentation.	$Diagnosis \ and \ procedure \ codes \ are \ validated \ consistent \ with \ EHR \ documentation.$
The insurer adjudicates the claims, and within seconds the physician and hospital receive electronic payments.	Real-time adjudication is not currently available.
Jack pays his personal liability with a debit card from his HSA.	Point-of-service collection is available—a patient's FlexCard is treated as a debit card to process payment. The patient's payment posts the same day.

With this vision, physicians are able to focus on providing exceptional patient care, the insurer has everything necessary to electronically process the claim on the first try, the hospital has zero days in accounts receivable, and, most important, the patient has a seamless clinical and financial experience—a true win for all.