

2023 Fall member retreat speaker

About me:



Peter Troia

Director of Revenue Cycle Collections

Peter serves as the Director of Collections for Advocate Health's Midwest Region.

For more than 20 years, Peter has held various leadership roles encompassing a wide range of collection types and strategies, passionately focusing on healthcare collections for the past 10 years with Advocate Health.

He has earned bachelor's degrees in both business and psychology from the University of Wisconsin-Whitewater.

He holds memberships with Healthcare Financial Management Association, Great Lakes Credit and Collection Association, Specialty Revenue Advisory Group, Experian's Health Collections Product Steering Group, as well as holds various designations degrees with ACA International.



2023 Fall member retreat speaker

About me:



Neil Wlodyka **Assistant Vice President, Patient Financial Services**

Neil is Assistant Vice President for Patient Financial Services for Atrium Health in Charlotte, North Carolina for acute care facilities, urgent care and physician practices in North Carolina, South Carolina and Georgia. In his current role, Neil is responsible for effective and efficient management of the operational processes with bankruptcy, estate and legal accounts, hospital and patient correspondence, customer service call center, the Corporate Privacy Officer and patient experience/complaint relations.

Neil has been with Atrium Health for 28 years with a total of over 33 years of healthcare experience in revenue cycle operations.

Neil has a Bachelor of Science degree in Business Administration from Appalachian State University with a concentration in healthcare management.

Neil and his wife, Amy of almost 29 years, are the parents of four children: Jack, Sam, Mary, and Ryan.



Advocate Aurora Health vs. Atrium Health

Now Advocate Health

Advocate Aurora Health and Atrium Health came together as one organization in December 2022.

As you can imagine, we have not integrated our business offices or aligned our processes at this point. Discussions have started with the aligning of the processes between the two markets and we have a long way to go.

Today, we are presenting the best practices from Advocate Aurora Health and Atrium Health as it relates to digital billing.



ADVOCATE HEALTH



NEARLY 6M UNIQUE



NEARLY 150K **TEAMMATES**



MORE THAN 21K PHYSICIANS



NEARLY 42K NURSES



NEARLY \$5B **COMMUNITY**



MORE THAN 1K SITES OF



67

HOSPITALS



\$27B+ REVENUE

AdvocateAuroraHealth

2.9M unique patients **\$2.4B** in community benefit

77K teammates **500+** sites of care

10K physicians 27 hospitals

22K nurses \$14B+ in annual revenue



2.9M unique patients **\$2.46B** in community benefit

73K teammates **500+** sites of care

11K physicians 40 hospitals

20K nurses \$13B+ in annual revenue





























Advocate Aurora Health vs. Atrium Health

Now Advocate Health

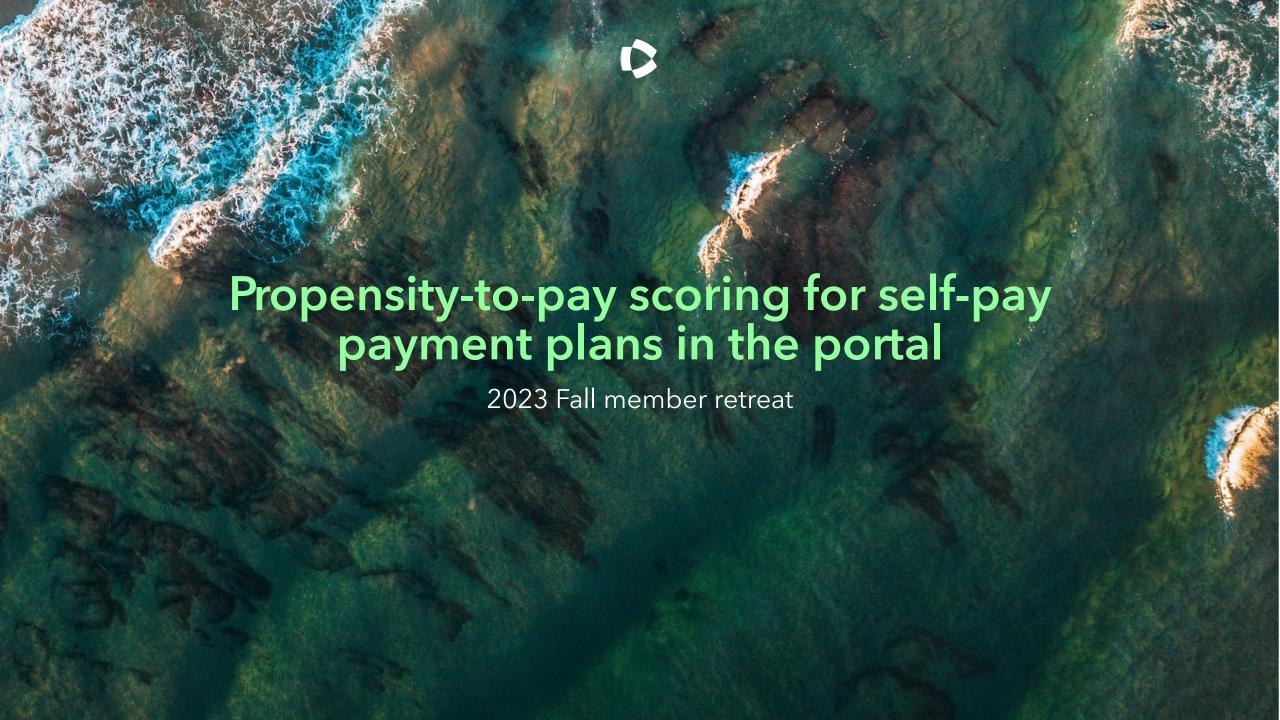


Learning objectives

The next foray in digital billing: Self-service payment plans and text-to-pay

- Illustrate a propensity-to-pay strategy that can be incorporated into payment plans via the patient portal
- Support the offerings of a loan servicing provider by integrating them into the healthcare system portal
- Validate a text-to-pay functionality for self-pay balance and statement notifications





Propensity-to-pay scoring models

Experian's segmentation score



Propensity-to-pay scoring models are an approach widely used by organizations to identify customer populations with the greatest likelihood to pay.



Experian's Segmentation Score is a propensity-to-pay scoring model.

- It consists of three variables:
 - Behavioral scoring
 - Credit Bureau data
 - Zip code

Experian's segmentation score range

Number 1 represents the **highest** propensityto-pay while 5 is the lowest.



Repayment guidelines

Staff members and initial portal logic

- Financial advocates, the Patient Billing Contact Center, and internal self-pay collections all operate off the same repayment guidelines.
 - These repayment guidelines are based on balance.
- The portal's payment arrangements page historically has operated off repayment guidelines with larger monthly payment amounts than what our staff members were using as guidelines.
 - Rationale: the payment arrangement page could not have conversations pertaining to individuals' hardship/financial health and team members are not able to negotiate on the medical debt.







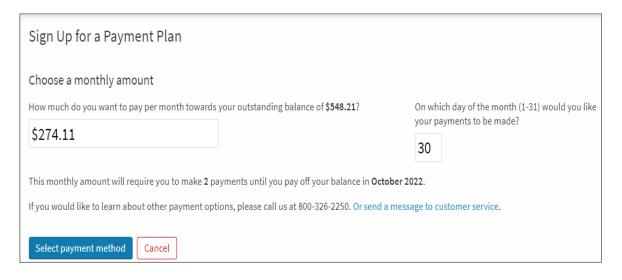


Payment plan arrangements page

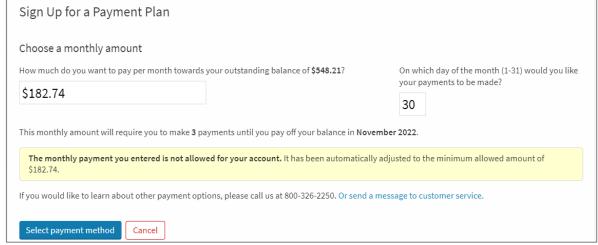
Suggested and minimum amounts

- On the portal payment arrangement page there is a "Suggested" amount for repayment.
- If someone does not enter at least the "Suggested," it then prompts the user for the "Minimum" amount.

Suggested Payment Plan Arrangement:



Minimum Payment Plan Arrangement:





New payment plan functionality

Experian segmentation score incorporated

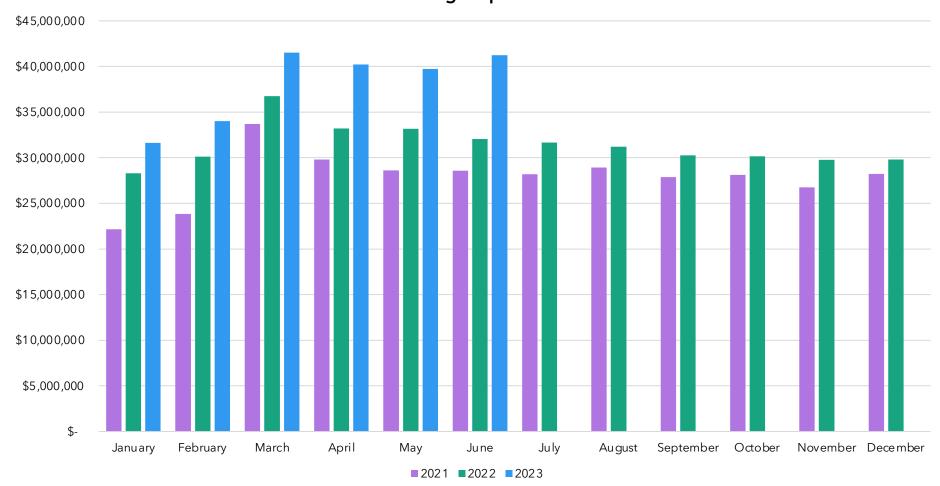
| | Historical Portal Logic | | Model with Segmentation Logic | | |
|--------------------|-------------------------------------------------|--------------------------------------------|-------------------------------------------------------------------------------------------|------------------------------|-------------------------------------------------|
| Account Balance | Proposed # of Payments (Suggested Amount Field) | Max # of Payments (Min Amount Field) | Payment History score based around segmentation score (B=No segmentation Score Available) | Net Increase No Change | Proposed # of Payments (Suggested Amount Field) |
| 50-600.99 | 2 | 3 | Segmentation 1/2/B | N | 2 |
| 50-600.99 | 2 | 3 | Segmentation 3 | N | 2 |
| 50-600.99 | 2 | 3 | Segmentation 4/5 | N | 2 |
| 601-1200.99 | 3 | 6 | Segmentation 1/2/B | | 2 |
| 601-1200.99 | 3 | 6 | Segmentation 3 N | | 3 |
| 601-1200.99 | 3 | 6 | Segmentation 4/5 N | | 3 |
| 1201-2500.99 | 5 | 9 | Segmentation 1/2/B | | 3 |
| 1201-2500.99 | 5 | 9 | Segmentation 3 N | | 5 |
| 1201-2500.99 | 5 | 9 | Segmentation 4/5 | N | 5 |
| 2501-5000.99 | 6 | 12 | Segmentation 1/2/B | | 4 |
| 2501-5000.99 | 6 | 12 | Segmentation 3 | N | 6 |
| 2501-5000.99 | 6 | 12 | Segmentation 4/5 | N | 6 |
| 5001+ | 9 | 18 | Segmentation 1/2/B | | 6 |
| 5001+ | 9 | 18 | Segmentation 3 | I | 6 |
| 5001+ | 9 | 18 | Segmentation 4/5 | I | 6 |



Portal payment plan performance

Dollars collected year-over-year





This graph is a representation of the payment plan dollars collected via the patient portal for 2021, 2022, and 2023.



Portal analysis

Segmentation and category breakout

| IL & WI | % of Volume | % of Balance | |
|-------------|-------------|--------------|--|
| Segment 1 | 15% | 10% | |
| Segment 2 | 42% | 41% | |
| Segment 3 | 27% | 31% | |
| Segment 4 | 12% | 13% | |
| Segment 5 | 4% | 4% | |
| Grand Total | 100% | 100% | |

These graphs supply intel as to what Experian segmentation scores end up paying via the portal and in what category amounts.

| IL& WI | More than Suggested | Suggested | Between Min and Suggested | Min | Less than Min | Total |
|-------------|---------------------|-----------|---------------------------|-----|---------------|-------|
| Segment 1 | 4% | 4% | 5% | 1% | 0% | 15% |
| Segment 2 | 10% | 10% | 18% | 3% | 1% | 42% |
| Segment 3 | 6% | 6% | 12% | 2% | 1% | 27% |
| Segment 4 | 3% | 3% | 5% | 1% | 0% | 12% |
| Segment 5 | 1% | 1% | 2% | 0% | 0% | 4% |
| Grand Total | 24% | 24% | 42% | 8% | 2% | 100% |



Portal analysis

Self-pay level and category breakout

| Self Pay Level | More than Suggested | Suggested | Between Min and Suggested | Min | Less than Min | Total |
|----------------|---------------------|-----------|---------------------------|-----|---------------|-------|
| 1 | 10% | 10% | 20% | 3% | 1% | 45% |
| 2 | 3% | 3% | 5% | 1% | 0% | 12% |
| 3 | 1% | 1% | 2% | 0% | 0% | 5% |
| 4 | 4% | 4% | 7% | 1% | 0% | 17% |
| 5 | 1% | 0% | 1% | 0% | 0% | 2% |
| 6 | 0% | 0% | 1% | 0% | 0% | 2% |
| None | 5% | 5% | 7% | 1% | 0% | 18% |
| Grand Total | 24% | 24% | 42% | 8% | 2% | 100% |

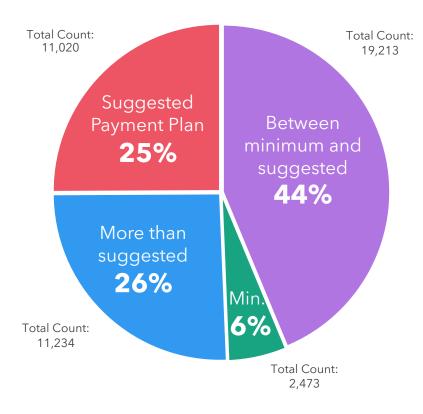
This graph supplies intel as to how and when the end user is paying.



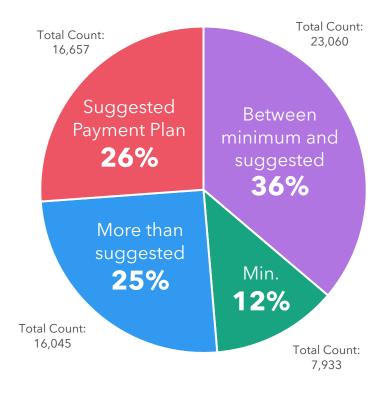
Portal payment plan selection

Year review with category breakout

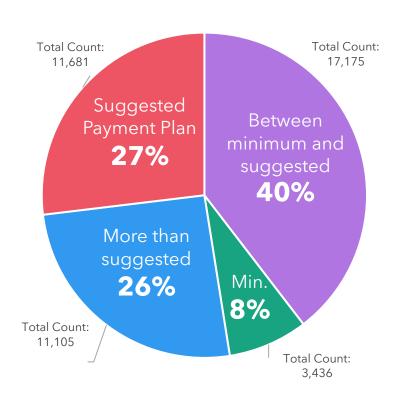




Midwest region performance - 2022



Midwest region performance - 2023





Next steps and other uses

Apply and execute

Next steps: Fine-tuning by adjusting logic per analysis (i.e., what segmentation scores to increase or decrease the "suggested" amounts further).

Other uses



Borrow the logic from this endeavor and apply it to our text campaigns any time we have self-pay balance notification changes.



Take the dialer performance of daily cash collection from internal self-pay collections and apply similar analysis to determine what segmentation scores are paying and how much.



Portal messages on the payment plan landing page.

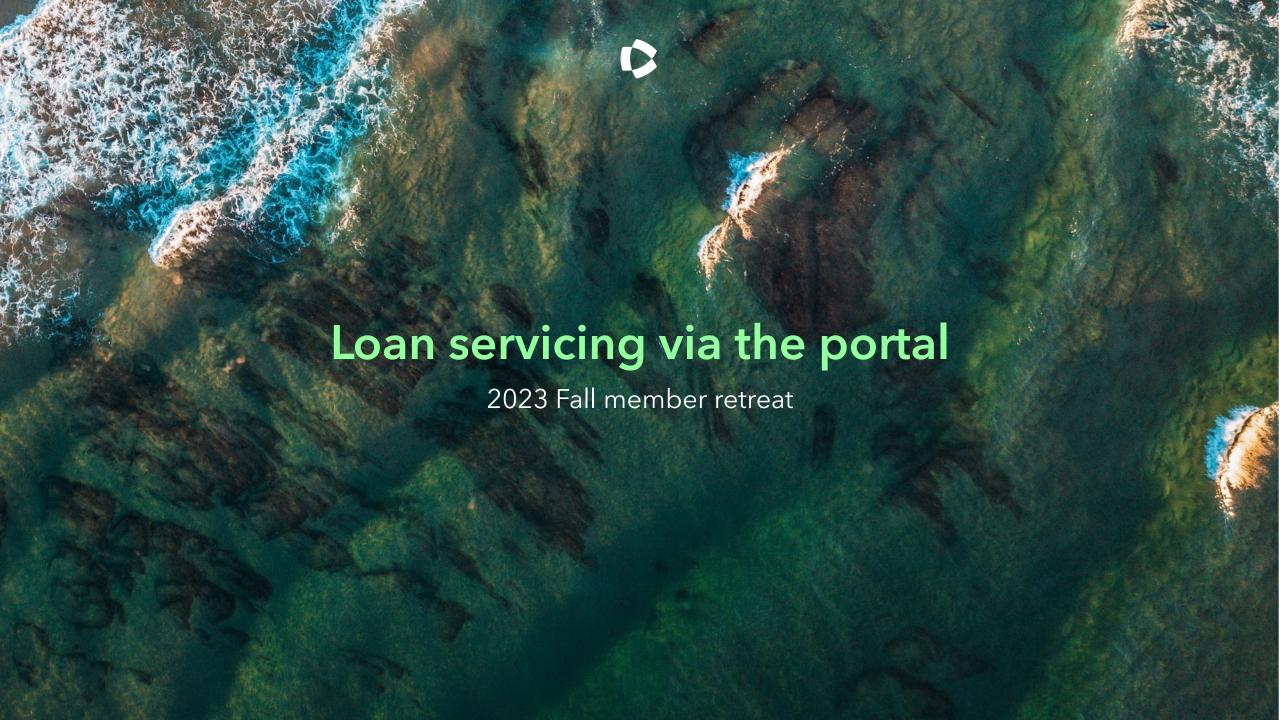


Statement messages.



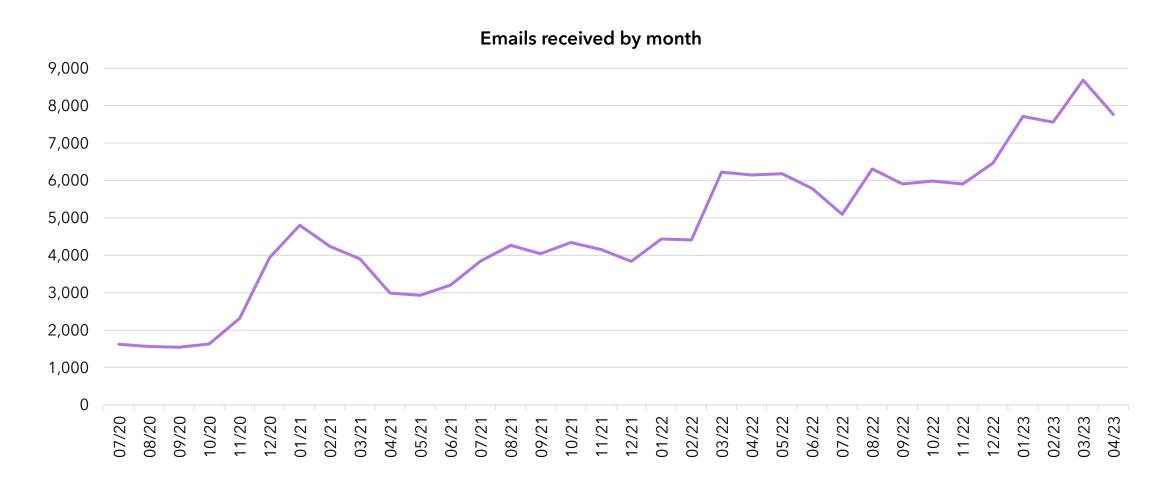
Holding recordings on phone lines.





Automation: patient self-service – Prepare for consumer adaptation

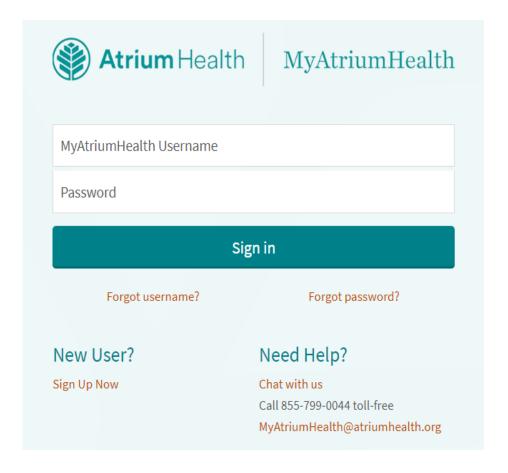
MyChart In Basket





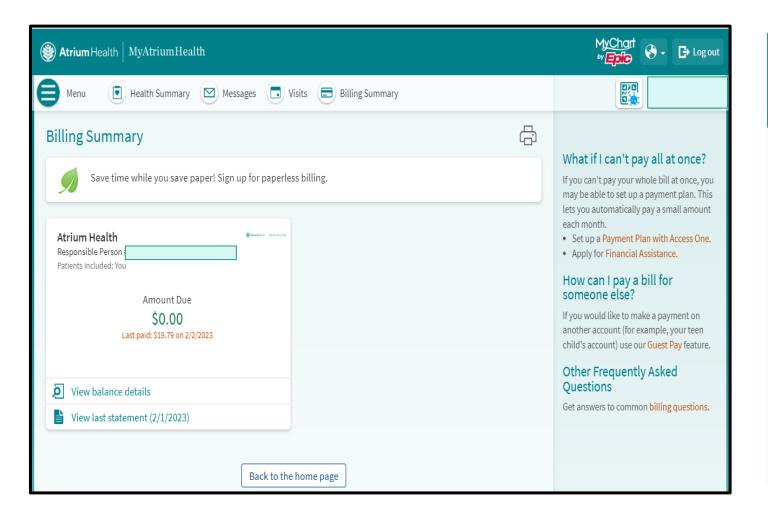
In 2021, Atrium Health introduced patient financing into the patient portal

- Payment plan partner and Atrium Health launched text activation pathway mid-June.
 - Days-to-activate continues to drop as more and more patients opt into utilizing self-servicing pathways to activate their payment plans.
- Gives patients the ability to self-enroll in patient financing.
- Allows patients to understand the low-interest and no-interest options available.
- Enables patients to pay with dignity, no matter their situation.





MyChart billing



Links in MyChart on the homepage:

- Learn more about current balances.
- Set up a payment plan.
- Apply for financial assistance.
- Permit a parent or friend to pay the balance.



MyChart billing



Setup a Payment Plan

Customize Payment Options

GENERAL HOSPITAL is pleased to partner with AccessOne to provide monthly payment plans for all patients. Their customized payment plan options offer many benefits:

- · This is a voluntary program and everyone is accepted
- No credit reporting or negative consequences
- No hidden fees
- · Easy payment methods online (www.myaccessone.com), or by phone, check, or auto pay
- · You can combine all family member balances on one statement

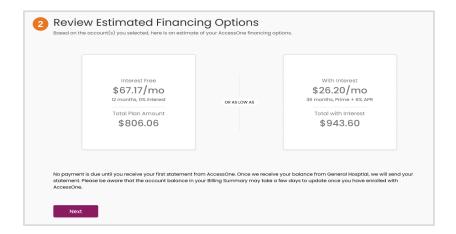
Payment amounts and payment options re-calculate based on the amount paid per month and if you add any additional medical charges to the account. See the AccessOne Charge Account Agreement that will be sent to you for full details. Terms and conditions apply.

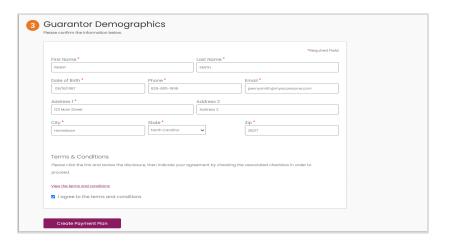
Select Accounts

Review your balances below and choose the account(s) you would like to include. If you are an existing AccessOne account holder, your selected amount(s) will be added to your current balance.

| | Account No. | Date of Service | Amount Due | Status |
|----------|-------------|-----------------|------------|----------|
| ✓ | 56234978 | 12/15/2021 | \$241.98 | Eligible |
| <u> </u> | 575394115 | 10/28/2021 | \$191.40 | Eligible |
| <u>~</u> | 575394103 | 10/26/2021 | \$372.68 | Eligible |

Next







MyChart billing

Impact of integrating patient financial with the patient portal:

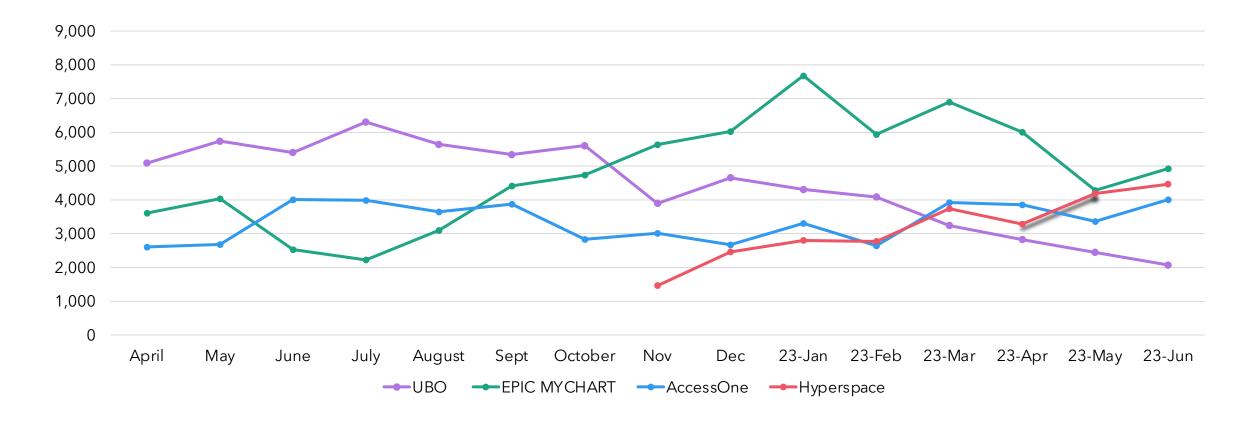
- **Year one: 14,644** guarantors applied for a payment plan for the first time.
- Calls to customer service regarding payment plans decreased dramatically.
- Patient satisfaction is strong with zero complaints regarding our payment plan business partner.





Referral source report (Atrium Health - Charlotte Region)

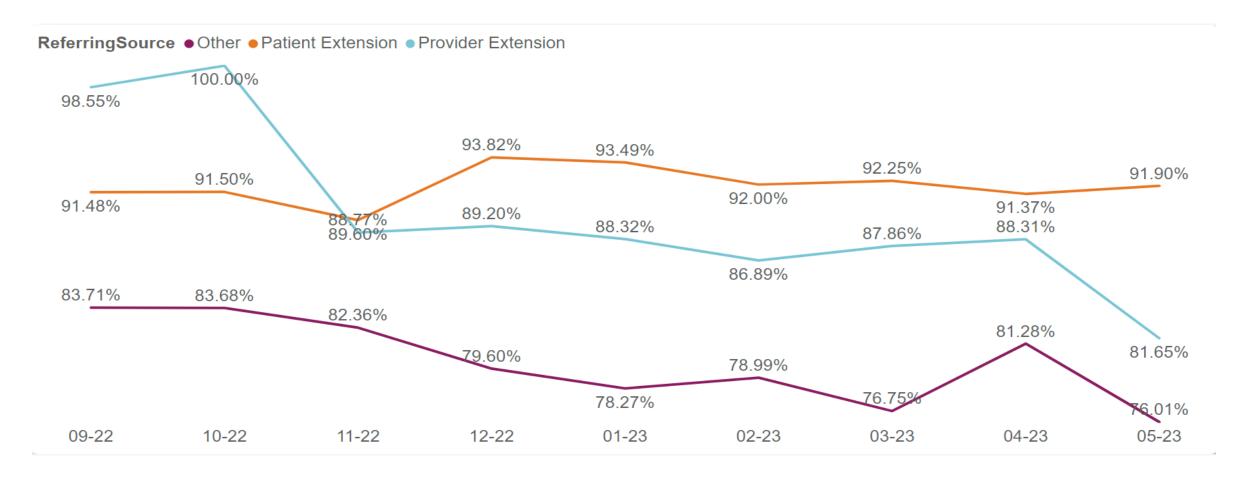
The referral source report below highlights four key referral pathways for patients to engage with the loan service payment solutions. MyChart's patient self-servicing platform accounts for about 30% of total referral inventory.





Activation rate by referral source

Patients that engage via MyChart enjoy the ease of use. As you can see, the adoption rate is consistently high in the **90th percentile** range.





Atrium Health text communication report

The payment plan partner and Atrium Health launched a text activation pathway in mid-June.

Days-to-activate continues to drop as more and more patients opt into utilizing more self-servicing pathways to activate their payment plans.

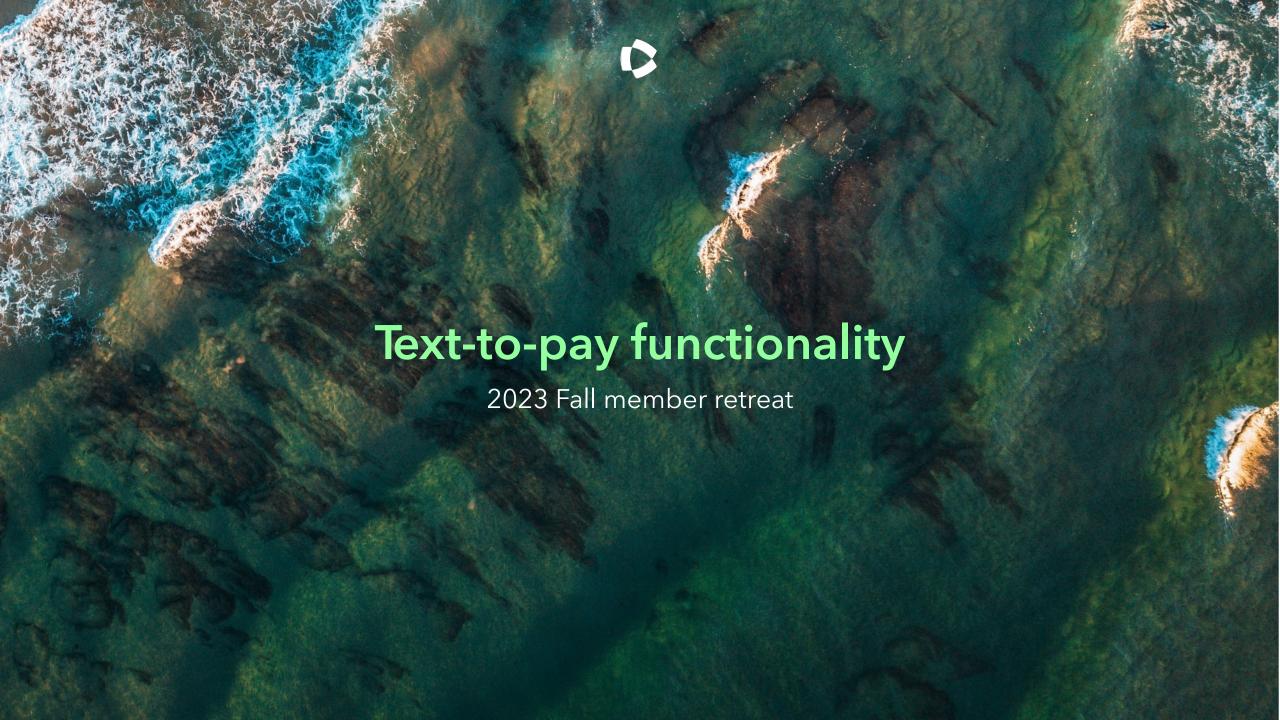
| Month | # of texts | Days-to- activate | % PAC activations | % IVR activations | % Web activations |
|--------------|---------------|----------------------|-------------------|-------------------|-------------------|
| June 2022 | 4,813 | 6 | 2% | 24% | 74% |
| June 2023 | 3,164 | 4 | 5% | 8% | 87% |



Activated via the web

(YTD 2023)

Average days-to-activate (Last six months)



Text-to-pay

In 2022, Atrium Health initiated its text-to-pay functionality.

- Notifies patients by text when their bill is ready.
- Shares a link where patients may make their payment directly-without having to log in to the portal.
- Piloted in a multi-phased approach.
- Fully operational within three months.





Text-to-pay

Atrium Health then initiated other notifications for:

- New statement
- New balance
- Balance updates
- Payment processed
- New guarantor detail bill
- New hospital account detail bill





Text-to-pay

RESULTS:







Collected in 2023



Statements saved from mailing



Pay in full after receiving a text



Next steps:

- Continue to finetune the digital patient experience for payment plan options.
- Monitor referral source to reduce activation times.
- Complete comprehensive communication via text-to-pay functionality.
- Enhance the chat feature.
- Continue focus and push to increase collections in MyChart.
- Turn on paperless statements.

"Continuous improvement is better than delayed perfection."

- Mark Twain



