

# Patient Experience

## “Through the Eyes of the Patient”

Presented by:  
Sue Whitecotton, CRCE-I  
Jen Zeback, CHAM

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# MedStar Patient Providers

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**MedStar Franklin Square Medical Center**

**MedStar Union Memorial Hospital**

**MedStar Good Samaritan Hospital**

**MedStar Harbor Hospital**

**MedStar Georgetown University Hospital**

**MedStar Washington Hospital Center**

**MedStar Montgomery Medical Center**

**MedStar Southern Maryland Hospital Center**

**MedStar St. Mary's Hospital**

**MedStar National Rehabilitation Hospital**

**MedStar National Rehabilitation Network - Ambulatory**

**MedStar PromptCare**

**MedStar Outpatient Ambulatory Sites (Various Services)**

**MedStar Health Research Institute**



# Patient Experience Challenges

- Variety Of Systems & Points of Access
  - Scheduling
  - Registration
  - Document Imaging
- Variety Of Training Programs
- 1 Enterprise Access Directory (EAD) - Duplicate Medical Record Numbers (Multiple Users/Processes)
- Multiple Call Centers

# Long Term Vision

- A Single Platform for all Lines of Business  
(Scheduling, Registration, EMR, Financials, Document Storage, etc)
- A Single Bill (Hospital & Physician where applicable)
- A Single Call Center
- Robust Scheduling & Registration



# Patient Experience

- You the Consumer- “What is **Most Important** to you as a Patient that you look for from your Health Care Provider that brings Value and has a Positive Impact to your Patient Experience?”

# You as a consumer - When you are being treated, what is the most important thing to you as far as your patient experience?

We polled our team and these are some of the things we came up with...

Correct Billing of insurance

Knowledgeable-helpful staff and Customer Service skills

Ease of Scheduling, Convenient Hours, timely Appointments

Honesty/Integrity  
HIPAA

Explain my healthcare benefits and how my claims are processed.

Satisfaction surveys

Correct/Accurate registration

Use IPADS/kiosk to verify insurance information

Electronic methods of collecting data & Pre-Registration capabilities

# Patient Experience

- **In your Current Role in the Revenue Cycle what is 1 thing that you would Change to have a Positive Impact on the Patient Experience?**



# In your current role in the Revenue Cycle what is 1 thing that you would change to have a positive impact on the Patient Experience?

**We Polled our Team and these are some of the things we came up with...**

Collect accurate info at time of registration and putting in the system

QA all financial/demographic info before billing

Reduce the # of people interacting with patients – streamline the process

Educating & Setting expectations with patients

Facilities provide accurate benefit information

Upgrade AR System/Streamlining Systems

Coordination among departments

Information on how to get a claim paid without changing coding

Daily patient refunds

Clear / Clean documentation on accounts

Someone with more legal knowledge

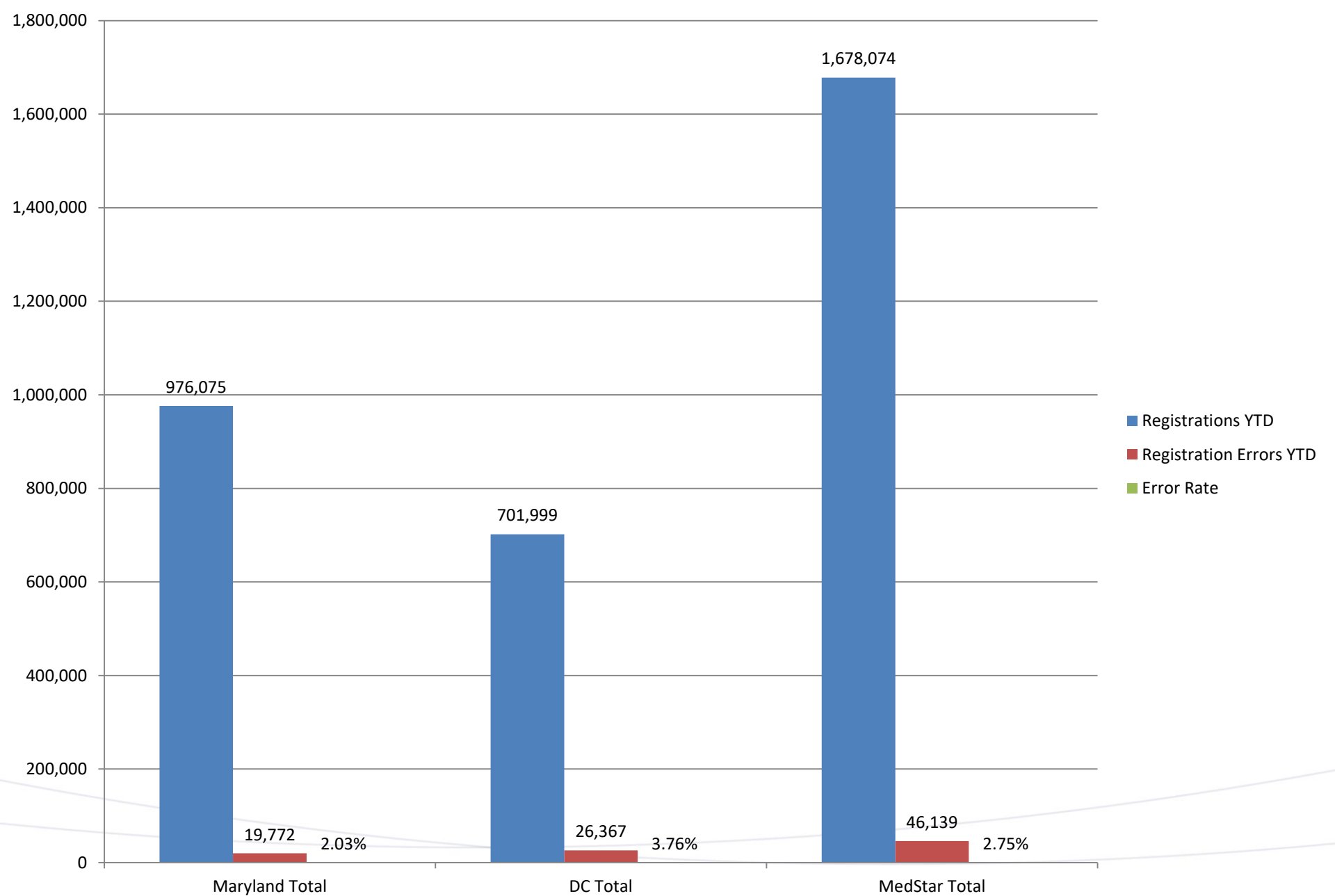
Statements go out sooner

Enhance reporting and tracking tools

# “Collect accurate info at time of registration and putting in the system”

A MedStar Hospital Access Dashboard													
	FY17	July	August	September	October	November	December	January	February	March	April	6-May	May
<b>REGISTRATIONS STATS</b>													
<a href="#">IP ADMITS</a>	11,322	1,094	836	846	1,138	890	1,046	953	933	858	1,093	214	214
<a href="#">ED ADMITS</a>	6,731	593	511	485	629	536	607	558	565	531	669	117	117
<a href="#">OP REG</a>	114,151	10,245	8,953	8,106	10,783	8,246	9,589	8,556	8,994	8,621	10,514	2,605	2,605
<a href="#">ED REG</a>	45,879	4,158	3,332	3,369	4,108	3,015	3,834	3,336	3,521	3,142	4,212	766	766
<b>Total Reg Stats</b>	<b>178,083</b>	<b>16,090</b>	<b>13,632</b>	<b>12,806</b>	<b>16,658</b>	<b>12,687</b>	<b>15,076</b>	<b>13,403</b>	<b>14,013</b>	<b>13,152</b>	<b>16,488</b>	<b>3,702</b>	<b>3,702</b>
<a href="#">OT'S*</a>	129											138	
<a href="#">ET'S*</a>	81											22	
<a href="#">PAT*</a>	1											4	

A MedStar Hospital Access Dashboard													
	FY17	July	August	September	October	November	December	January	February	March	April	6-May	May
<b>REG ERRORS</b>													
<a href="#">BAD ADDRESSES</a>	4,271	393	234	290	389	272	282	208	279	175	367	67	67
<a href="#">SMS REG ERRORS</a>	3,206	229	228	296	180	140	141	128	182	111	183	25	25
<a href="#">IDX REG ERRORS</a>	400	57	49	45	33	37	30	20	56	228	55	14	14
<b>Total SMS &amp; IDX Reg Errors</b>	<b>3,606</b>	<b>286</b>	<b>277</b>	<b>341</b>	<b>213</b>	<b>177</b>	<b>171</b>	<b>148</b>	<b>238</b>	<b>339</b>	<b>238</b>	<b>39</b>	<b>39</b>
<b>% of Reg Errors to Total Reg Stats</b>	<b>2.02%</b>	<b>1.78%</b>	<b>2.03%</b>	<b>2.66%</b>	<b>1.28%</b>	<b>1.40%</b>	<b>1.13%</b>	<b>1.10%</b>	<b>1.70%</b>	<b>2.58%</b>	<b>1.44%</b>	<b>1.05%</b>	<b>1.05%</b>



## **“Collect Accurate info at Time of Registration and Putting in the System”**

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- **Plan Code Clean Up Workgroup**
- **Automate tagging process**
- **Continuous Re-education to Patient Access based on errors**
- **Tasking Patient Access Directors with working eScan reports**
- **Focused group to ensure system interfaces are working as expected**

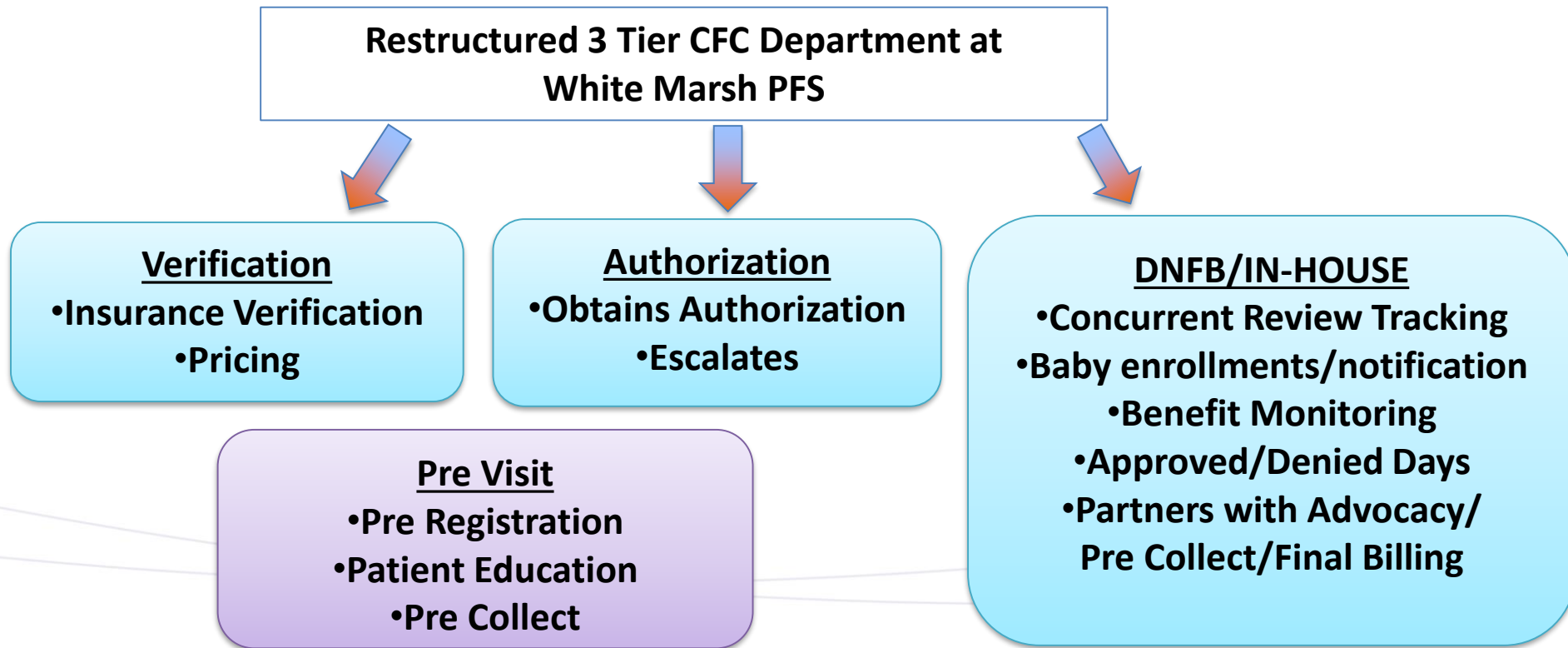
# “QA All Financial/Demographic Information”

- **Weekly Audits and Benchmarking by Management**
  - **Address validation (Use of Search America)**
  - **HDX- (Use of eligibility and scanned image in Document Imaging)**
  - **Securing ID and Insurance Cards**
  - **Basic Demographic accuracy**
  - **MSP Completed**
  - **Authorization Obtained and Secured in Proper Field**

# “Reduce the # of People Interacting with Patients – Streamline the Process”

## Redesign

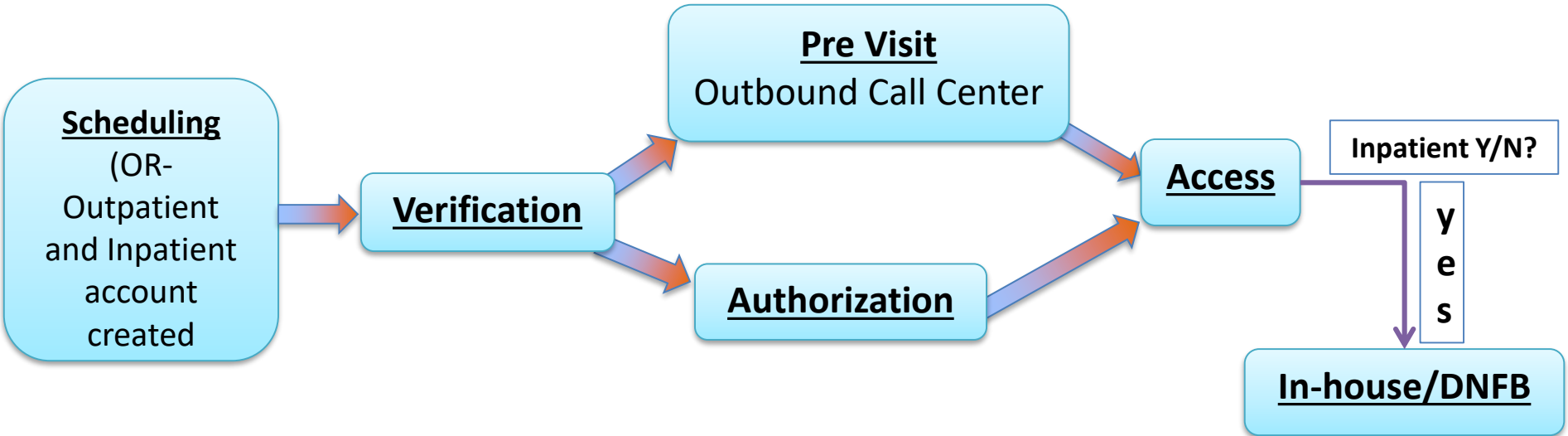
- Streamlined the Scheduling, Clearance, Registration process (4/5 touch points to 1 touch point)
- Restructured & Consolidated CFC - Created 3 Pillars
- Moved Pre-Visit to Outbound Call Center





# “Reduce the # of People Interacting with Patients – Streamline the Process”

## CFC Workflow



# “Education & Set Expectations with Patients - Promote Awareness”

- Pre-visit Team
  - Outbound Calls/Patient Contact
  - Complete Pre-Registration
  - Explain Benefits and Out of Pocket Cost
  - Pre-Collect/Set Expectations for Point Of Service Collections and Prior Balance Collections
  - Financial Screening for Medicaid Eligibility and or Financial Assistance (Runs FPL and Propensity to Pay)
  - Ability to Call Record for QA & Training Purposes

# “Education & Set Expectations with Patients - Promote Awareness”

- Advocacy Redesign
  - Pricing and Bedside Collections of ED Admissions & Observation Patients
  - Continued Collection Efforts on patients while In-house and at time of Discharge
  - Hospital Presumptive Eligibility (HPE) Certified and screened in targeted areas
  - Medicare No Secondary Screening
  - Expanded Screening on Targeted Outpatient Areas for POS Collections and Financial Screening (ED, ONC, Cardiac, etc)

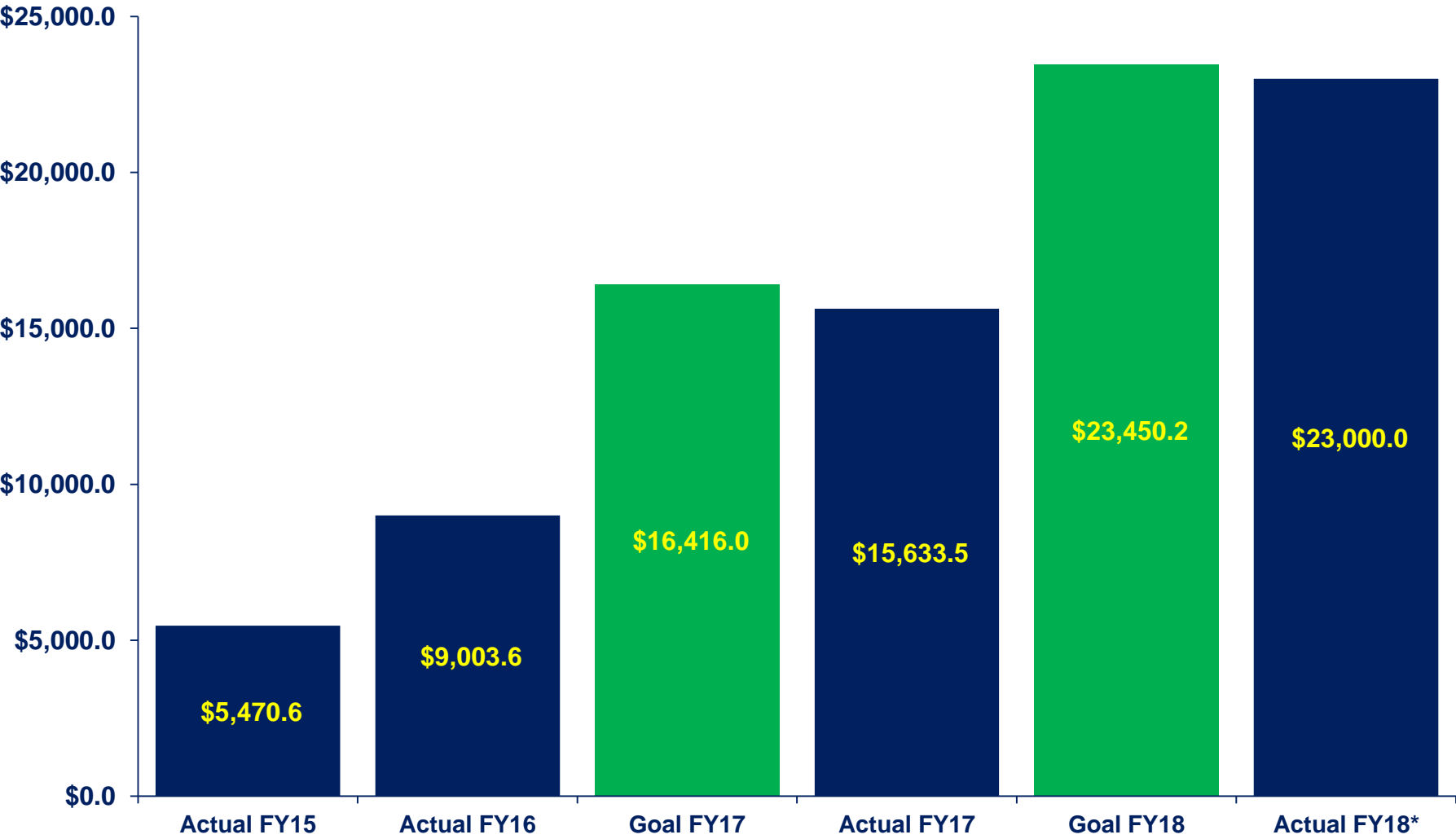
# “Educate & Setting Expectations with Patients”

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## Time of Service (TOS) Collections Mandatory Training Initiative

- Major Culture Change for both Patients, Physicians & Associates
- Patients weren't always aware of their Benefits and what they Owed at TOS
- Associates weren't comfortable with asking for money from patients – Do Associates have the Right Skills?
- Identified the need for a Robust Training around TOS Collections
- The Training Department Partnered with MI2 and SiTEL to create a TOS Training Curriculum for Pre Visit, Customer Service and Patient Access

# Cash Collections- February 2018 YTD



# “Education & Setting Expectations with Patients”

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- MedStar PFS is in the process of developing Satisfaction Surveys
- We will be contacting patients who have been contacted by our PFS Pre Visit Department
- Solicit feedback from the patients to identify opportunities for improvement.
- Developing Community Outreach Programs to Educate Patients on Insurance Benefits and how to Read EOB's.
- Exploring Advanced Technology





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# Questions





Access Can Help Initiate Excellence Via Education

Contact the PFS Training Department at:  
[TrainingDepartment.PSS@MedStar.net](mailto:TrainingDepartment.PSS@MedStar.net)



thank  
you!

