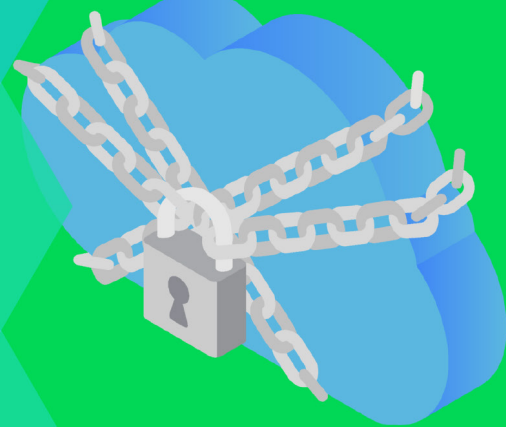








# 6 tips for improving patient collections



With the rise of high-deductible health plans (HDHPs), patients are taking on more responsibility for their bills. In turn, practices need to be more diligent in focusing on patient payments.

Here are six best-practice methods to improve patient collections:

-  **1. Gather patient insurance and contact information before patients arrive for an appointment.** Staff should be prepared to collect complete and current insurance and contact information when a patient calls to make an appointment. Patients can be given the option of mailing or emailing information.
-  **2. Verify insurance eligibility and identify amounts due from patients prior to patient visits.** Prior to a patient's appointment, provider organizations should check with payers to verify coverage and clarify payer rules.
-  **3. Collect copays and other patient-responsible balances at the front desk when the patient checks in.** The best time to collect payment from patients is when you have the opportunity to do so face-to-face. Practices need to develop and communicate clear policies to patients, enforce them routinely, and consider the option of rescheduling non-emergency appointments if the requirement is not met.
-  **4. Offer multiple payment methods.** Make the process of paying a bill easy through flexible options that include cash, check, or credit/debit card. This practice will increase the likelihood of collecting amounts due while the patient is in the office and can streamline overall billing processes.
-  **5. Offer payment plans and track them.** For procedures that extend beyond the health savings account, or for uninsured patients, establish plans that let patients pay over time, and train staff on how to communicate these options to patients effectively and track them properly.
-  **6. Make follow-up part of the routine.** Perseverance is key to maximizing collections for patients who don't make timely payments, yet many offices don't routinely call patients who have outstanding balances. Develop a routine, proactive timeline for initiating phone contact, and create a script for staff to follow.

