


**Session 1: Best Practices for
Preparing a Client for a
Title X Visit**

Presenter: Ann Finn
Healthcare Reimbursement Consultant
AF Consulting, LLC
August 19th and 20th, 2024

1

Introductions / Contact



Ann Finn
Phone: 518.522.8159
ann@annfinconsulting.com

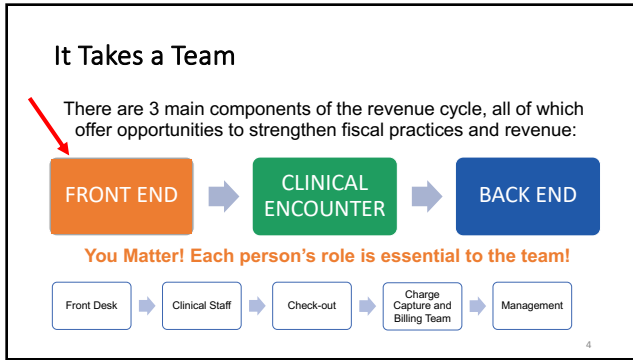
2

Today's Agenda

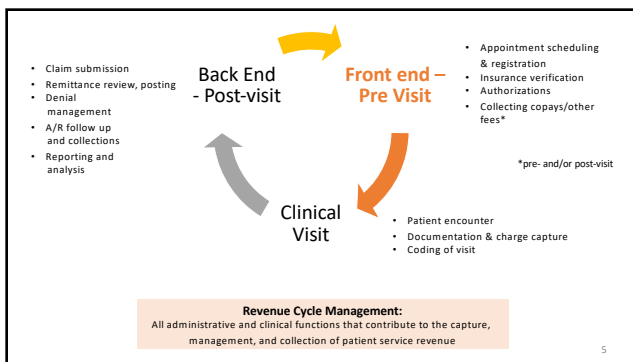
- Introductions
- Overview of RCM – Team Roles
- Front End Challenges and Strategies for Improvement
- Scripting Examples
- Other Q/A Activities
- Tools / Resources
- Questions and Discussion

- **Session 2** – Capturing the Clinical Encounter (following this session 10:30am – 12:30 pm)
- **Session 3** - Revenue Management in Title X (Tomorrow 10:00 – 11:30 am)
- All are encouraged to join each session!

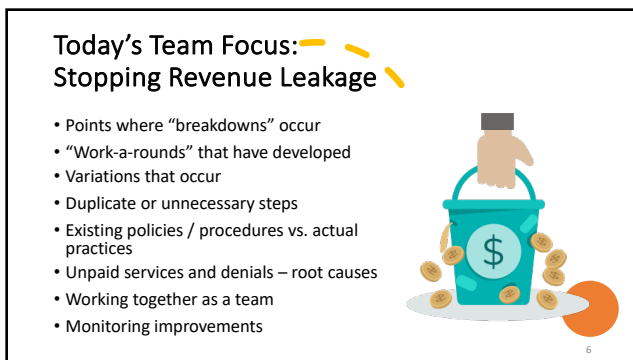
3



4



5





6

Front end

7

Front Desk: Key Players & Activities

 Call Center/ Front Desk/ Clinic Manager	Scheduling Registration/Check-in <ul style="list-style-type: none">• Insurance verification, prior authorizations; Assess/enroll in Medicaid (MA) / Plan First• Accurate family size/income assessment Consistent, Appropriate Messaging
 IT - Systems	Ensuring Payers Set Up Properly Templates, codes and fees updated Ensuring System is Efficient

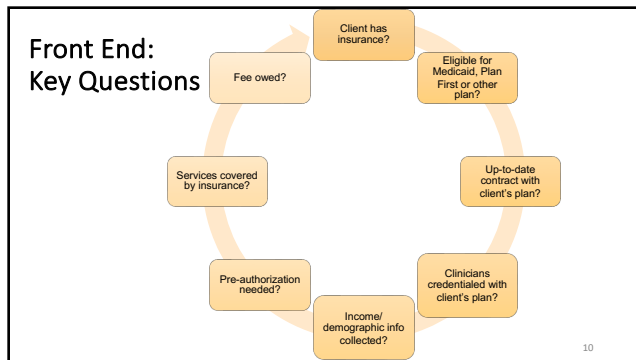
8

Poll Survey

What challenges do you or your staff experience related to front desk and messaging best practices?

1. Inconsistent staff/client communications and expectations
2. Unclear on staff roles / tasks to be completed at scheduling, check-in and check-out
3. Training/staff turnover
4. Time – the front desk is a hectic place!
5. None – we are humming along 😊

9



10

Impact - Front Desk QI Example

	Per Visit Average	PRE-QI	\$ PER 6,000 Visits	POST QI	\$ PER 6,000 Visits
Self-Pay/Uninsured	\$5	45%	\$13,500	35%	\$10,500
Unknown	\$0	10%	\$0	0%	\$0
MI Medicaid FP visit	\$100	25%	\$150,000	40%	\$240,000
Private Insurance	\$75	20%	\$90,000	25%	\$112,500
Total		100%	\$253,500	100%	\$363,000

11

- ### Front-End Policies, Procedures, Job Aides
- Scheduling Processes:
 - Number/type of appointment slots
 - Scheduling to accommodate no show volume
 - Accommodation of walk-ins
 - Contacting/rescheduling no-shows
 - Expected visits per provider and day
 - Payment policy communications at time of scheduling

12

Front-End Policies, Procedures, Job Aides
(cont'd)

2. Insurance Coverage:

- Insurance verification*
- Authorization of services that require it
- Screening for Medicaid and Plan First /assisting in enrollment*

*May occur at registration time or check-in

13

13

Benefit Verification



- Clearly communicate information needed to verify insurance (at scheduling, reminder calls or texts, patient portal)
- Front desk staff should verify patient coverage before or at EACH visit
- Make copy of insurance card at each visit – this is a big one
- EHR, clearinghouse, internet companies offer services
 - Run batch night before
 - Run at visit if needed
- LARC manufacturers also offer a free benefit verification process
- Create a tracking sheet by payer of benefits and needs for prior authorizations
- Set up contracts with plans you do business with - review

14

14

Front-End Policies, Procedures, Job Aides *(cont'd)*

3. Check-in/Registration Processes:

- Demographics, Family size & income information gathering
- Insurance information recorded/verified
- Confidentiality appropriately explained
- Repeat payment policy communications
- Client acknowledgement of financial P&P's (written)

15

15

Poll Survey

• *Teen SRH visits should not be billed due to confidentiality concerns.*

- A. TRUE
- B. FALSE
- C. IT DEPENDS

16

16

MDHHS' Plan First

- Plan First is a limited Medicaid benefit that covers family planning services such as contraceptive services and supplies, sexually transmitted infection (STI) testing and treatment, vaccines, and other preconception health services.
- There are no gender or age requirements.
- Individuals on Plan First do not have full Medicaid coverage.

Covered Services:

- Office Visits for family planning related services
- Birth control medication and supplies
- Some lab tests
- Some cancer screenings
- Testing and treatment for sexually transmitted infections
- Voluntary sterilization procedures and follow-up care

17

17

MDHHS, Title X and Setting Fees

- Title X-funded health centers provide services regardless of one's ability to pay, insurance or lack thereof, and documentation status
- Use a **Schedule of Discounts** developed for individuals with family income between 101% and 250% of FPL to assure services are billed based on ability to pay (*Section 8.4.2*)
 - Sub-recipients must use mandated quartile proportional increments MDHHS distributes each year in developing their Schedule of Discounts
 - Can however request and receive an MDHHS approved waiver to use other proportional increments

18


18

MDHHS, Title X and Setting Fees: Family Income

Patients < 100% FPL must NOT be charged Bill all 3 rd party payers	101% - 250% FPL: charged discounted fees based on Schedule of Discounts Bill all 3 rd party payers	Waive fees for indiv > 100% FPL if Director determines they are unable, for good cause, to pay for FP services	> 250% FPL, charged per Fee Schedule Fees are set to recover the reasonable cost of providing services; Bill TPP's	Eligibility for discounts for un-emancipated minors who receive confidential services must be based on the income of the minor
--	--	--	--	--

19

19



Q/A Activity: SFDS

- Review the patient volumes in each of your sliding fee discount schedule categories
- Is there a distribution of discount amounts applied across self pay clients or are all/most of your clients at 100% slide and no fees?
- Does it make sense to you or seem like an opportunity for improvement?

20

20

Verification of Income

<ul style="list-style-type: none"> Family income should be assessed before determining whether copayments or additional fees are charged. <ul style="list-style-type: none"> MDHHS does not require verification of income. Client income is self-reported. Income must be documented in the client record and there must be proof of application of the sliding fee scale. Eligibility for discounts for minors who receive confidential services must be based on the income of the minor (Section 8.4.5) 	Your household size includes: <ul style="list-style-type: none"> Patient applying Spouse/Partner (w access to their income) Any children being supported in your household Pregnant women count as 2 Anyone who is included on patient's federal income tax return
--	---

21

21

- Ava's income is \$34,000/year
- Single mom w two children (her family size = 3)
- She has insurance. Her co-pay is \$20
- To apply the sliding fee scale, first, match her income to your sliding fee scale
- The sliding fee scale will show you the discount she would receive. In this situation, her discount would be 80%

Gross Family Income 2024	<=100%	120%	140%	160%	250%
# in family:					
1	\$15,060	\$18,072	\$21,084	\$24,096	\$37,650
2	\$20,440	\$24,528	\$28,616	\$32,704	\$51,100
3	\$25,820	\$30,984	\$36,148	\$41,312	\$64,550
4	\$31,200	\$37,440	\$43,680	\$49,920	\$78,000
5	\$36,580	\$43,896	\$51,212	\$58,528	\$91,450
6	\$41,960	\$50,352	\$58,744	\$67,136	\$104,900
7	\$47,340	\$56,808	\$66,276	\$75,744	\$118,350
8	\$52,720	\$63,264	\$73,808	\$84,352	\$131,800
DISCOUNT	100%	90%	80%	70%	10%

25

25

SCENARIO 1:

- If fee for services = \$125
- With 80% discount, fee = \$25
- Insurance co-pay = \$20
- Ava pays \$20
- Bill Ava's insurance the full fee
- Insurance co-pay < discounted fee, client pays the co-pay

SCENARIO 2:

- If fee for services = \$60
- With 80% discount, fee = \$12
- Insurance co-pay = \$20
- Ava pays \$12
- Bill Ava's insurance the full fee
- Discounted fee < co-pay, client pays the discounted fee

26

26

Front-End Policies, Procedures, Job Aides (con't)

4. Exiting and Fee Processes:
- Charges for visit – codes captured for all services
 - Payment/ fee expectations and collection
 - Scheduling follow-up visits

27

27

Exiting the Client

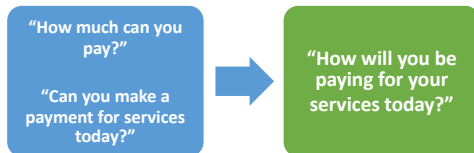
- Calculate/explain charges/discount, **TPP billing/confidentiality (as appropriate)**
- Ask for/collect client fees due (may include past balance)
- Ask for donations – reminder this is voluntary
- If client cannot/does not pay:
 - Review payment plan, monthly invoice process, collection policies
 - Waiving charges policy

28

28

Talking to Clients

- Listen to your team as they communicate to the clients to uncover if messaging is accurate



29

29

Talking to Patients *con't*

- Set expectations about fees at first scheduling call with patient
- May be difficult for staff to talk to patients about income and fees
- Don't assume teens and other clients don't want insurance billed for family planning (confidential) services – ask first
- Michigan Medicaid does not send home EOB's – explain to clients

Best Practice: Scripts that incorporate messaging about income verification are a good way to support staff who interact with patients and ensure consistency with every patient at every visit.

30

30

Financial KPI's (Key Performance Indicators)

Metrics organizations use to track, measure, and analyze and optimize your clinic's financial health

- **What gets measured gets managed...and improves!**
- Measuring particular business objectives or processes helps identify problem areas to address
- Shows trends – enables informed decisions
- We'll dig deeper into this tomorrow



31

31

Poll Survey

• **Do you currently use KPI's to monitor front end processes and related revenue?**

- A. Yes – we have a several helpful KPIs and share results with team
- B. Inconsistently – we have a few but don't monitor them consistently or involve staff enough
- C. No haven't done this yet – but wow what a great idea!



32

32

Fee Collection Example:

Using KPI's to Monitor Change

- Title X clinic identified an issue with collecting fees from patients
- They worked on improving processes for collecting family size and incomes, developed scripts for staff
- They tracked collection rate KPI each month and were surprised to see it not increasing as expected
- Re-evaluated the process and identified patients were leaving without being exited by the front desk where fees are collected
- Changed their process to have patients walked to front desk at end of visit by staff
- Collection rates improved!

33

33

Examples of KPI's for Front End

- Payer Mix (# visits per payer vs unknown, self pay)
- Number/% of Clients in Each Discount Category
- Number/% of Denials due to front desk errors
 - Demographic errors
 - Payer coverage denials
 - Prior authorizations not gotten
- Productivity
 - Clinical visits (visits/FTE or RVU's/clinician)
 - No show rates / walk in rates
- Other?

34

34

**Scripting Language Example 1:
Charging the TPP and Confidential Services**

- Inaccurate client communication
 - “Do you want confidential services?”
- Accurate client communication
 - “All services are confidential, but billing your TPP means that a statement from the insurance company will be mailed to your home outlining these services. Will this create any problems for you with other members of your household?”

35

35

**Scripting Language Example 2:
Medicaid Enrollment**

- Inaccurate client communication
 - “Do you want to sign up for Medicaid?”
- Accurate client communication
 - “Based on your family size and income information, you may qualify for Plan First, a type of insurance coverage that would cover the cost of this visit and other related services going forward. It should take no more than 15 minutes to enroll, and I would be glad to help you.”

36

36

Scripting Language Example 3: Discounting of TPP Related Fees

- Inaccurate client communication
 - “You will be responsible for paying copays, coinsurances and deductibles”
- Accurate client communication
 - “Once we receive payment from the insurance company and know the fees/amounts you are responsible for from your insurance company , we will discount them based on your family size and income. You will never pay more by using your insurance than you would without it.”

37

37

Scripting Language Example 4: Asking For Payment

- Inaccurate client communications
 - “How much can you pay?” or “Can you make a payment for services today?”
- Accurate client communications
 - “How will you be paying for your services today? We accept cash, check, credit cards and Venmo.”

Consistent messaging should start at the time of scheduling the visit!

38

38

Scripting Language Example 5: Asking for Donations

- Inaccurate client communications
 - “Can you make a donation (and/or a specific \$\$ amount) for your services today?”
- Accurate client communications
 - “We use limited Federal grants to help pay for services and appreciate donations to provide additional financial support towards the cost of services for clients who cannot pay. Are you able to make a donation today?”

39

39

Other Scripting Language

- Payment expected at time of visit
- Family size and income gathering
- Why you gather family size and income information for all clients
- Ask staff "What questions/topics are uncomfortable for you to address with the clients?"
- Others?

40

40

Q/A Activities: From Paper to Successful Implementation

- Think about frequency/approach to reviewing/developing policies & procedures, job aids – **add/incorporate scripted messaging**
- Training Suggestions:
 - New team member training
 - Review policies and procedures/job aids/messaging with team regularly
 - Observe/listen
 - Utilize team involved
 - Monitor team performance
 - Other?

41

41

Possible QI Activities



42

42

Session 1 Closing

IDENTIFY 1-2 FRONT END CHALLENGES THAT
RESONATED WITH YOU FROM SESSION

WHAT STRATEGIES CAN YOU SHARE WITH
YOUR TEAM TO RESOLVE THE CHALLENGE?

WHO ON YOUR TEAM DO YOU NEED TO
WORK WITH?



43

Resources – see handout for full list

- RHNTC: Financial Management Toolkit
<https://rhntc.org/resources/financial-management-toolkit>
- RHNTC: Collecting Copays and Applying Sliding Fee Scales: A Job Aid for Front Desk Staff
<https://rhntc.org/resources/collecting-copays-and-applying-sliding-fee-scales-job-aid-front-desk-staff>
- RHNTC: Client Fee Collections: Frequently Asked Questions for Title X Family Planning Agencies
Job Aid
<https://rhntc.org/resources/client-fee-collections-frequently-asked-questions-title-x-family-planning-agencies-job>
- RHNTC: Client Fees Calculator
<https://rhntc.org/resources/client-fees-calculator>

44

44



45

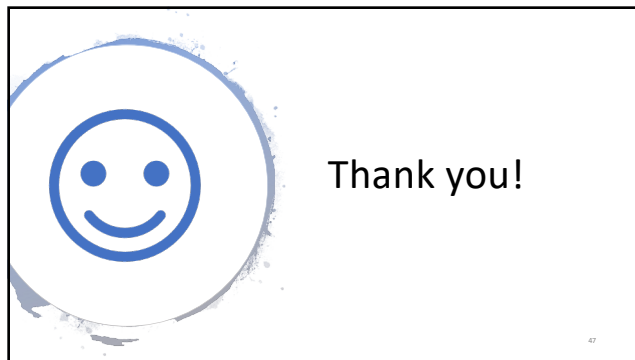
45

Disclaimer

- The guidance and scenarios provided today are meant as examples and for education purposes only.
- Review material presented with ED/CFO prior to making changes to be aware of any other programs or payer issues that require consideration.
- Any questions should be reviewed with grantee.

46

46



47
