

FINANCIAL MANAGEMENT EMOTIONAL INTELLIGENCE STRATEGIES THAT ADVANCE PROFITABILITY: STAFF CONSIDERATIONS AND PAYMENT POLICIES

■ By Susan Fink Childs, FACMPE

In this article ...

Earning the trust of patients through emotional intelligence strategies and fair payment policies leads to better patient-practice relationships as well as healthier finances.

PATIENT CARE IS FINANCIAL AS WELL AS

clinical. Patients often depend on us to interpret their insurance plans and benefits and explain what they owe for medical care and why. Each time we assist a patient, we are bonding with them and building their trust in us. That trust can lead to a healthy financial rapport — one that separates the cost from the care and allows the patient to concentrate on treatment and healing. It's a win-win situation.

The ever-increasing percentage of high-deductible plans places more responsibility on us to collect larger amounts of money at the time of service, which can be challenging for our patients. We can meet them in the middle and go from negotiation to collaboration by using policies that are respectful and fair and by calling on our emotional intelligence.

BALANCE EMOTIONS AND COMMON SENSE

We all have distinguishing characteristics that make up our personal competence. For example, I'm a little stubborn and will always stand up for the little guy.

Being aware of how we act, interact, and react within relationships and how we handle our relationships based on that awareness is termed emotional intelligence. This emotional intelligence helps us manage our relationships with patients, staff, and physicians. For example, it helps us control our impulses when we are communicating with an irate patient about payment.

It's often said that you never know where someone is coming from. Emotional Intelligence actually grows when we

develop heightened sensitivity to our environment and the people in it. Reflecting empathy and understanding is essential to gaining patients' trust and helping them feel comfortable when talking about payment.

In dealing with patients regarding accounts receivable policies, do so in a respectful and professional manner. Demonstrate emotional intelligence in the following ways.

1. Address the patient's stress in a productive manner. For instance, arrange monthly payment dates around times most convenient for them, not for the practice.
2. Be aware of the patient's body language and other non-verbal communications so you can get a better sense of how they are feeling. Pay attention to your own body language as well; you may be delivering a soft message, but if your hands are on your hips, you are implying judgment that negates your positive conversation.
3. Choose your words wisely. Challenging discussions require emotional intelligence to ensure a positive solution.

STAFFING WITH EMOTIONAL INTELLIGENCE

Top performing salesclerks are 12 times more productive than those at the bottom and 85 percent more productive than average performers, according to research by Daniel Goleman, who has done groundbreaking work in the area of emotional intelligence and leadership and wrote the bestseller *Emotional Intelligence: Why It Can Matter More than IQ*.

As you hire collections staff, consider the practice's potential for success if you are using emotional intelligence in the selection process. Emotional intelligence can promote staff and patient engagement and, coupled with financial responsibility, can help accelerate a payment plan that is personalized and fair to the patient, and improves the collection process.

Patients' fears about not being able to afford current and future treatment can be reduced with empathy and assurance that the financial obstacle can be overcome. While clinical staff members address treatment, our role is to help the patient feel reassured regarding their financial care.

When you have a great relationship with a patient who always pays his or her bill, that connection places you (hopefully) first on the list to be remitted. Clearly, this is where relationships are important. Educate your staff members to know your patients and how to set up payment plans in the most appropriate and respectful manner. Time and emotional intelligence invested in a process yields payment and profit.

FAIR WARNING AND FAIR EXPECTATIONS

You want patients to be as prepared for their visit as possible, and communicating financial expectations before their appointment is the best way to do that.

For example, dedicated billing staff should contact patients before their appointment to confirm copays and coinsurances, alert them to previous balances, and provide the option of paying over the phone at that time or upon check-in. If the patient chooses to pay upon check-in, this is documented on

the patient's screen for the front desk to see and collect in a respectful manner.

Imagine the patient who has not been contacted before an appointment, is unaware of payment protocols, and is surprised upon check-in to learn he or she must pay an unexpected balance. This uncomfortable situation is easily avoided with one phone call before the appointment. The patient arrives having already settled the bill or prepared to pay upon check-in.

Again, this is one of those things that may take a little extra time, but benefits the practice substantially. You are actually relieving the initial dread of "How much will it really cost?" by communicating their financial responsibility at the first opportunity while at the same time improving the medical practice cash flow.

The second step in establishing financial responsibility is with an appointment confirmation that includes a generic statement such as *Please be prepared to remit any copays or coinsurances due at the time of the visit according to your insurance plan. Thank you.*

Check-in for the appointment should be the third time they are reminded about their financial responsibility when the receptionist requests payment. A prepared patient is more mentally ready to remit 100 percent of the amount.

It's also helpful to place new policy information in strategic locations in the office where patients can note the information or actually take a paper copy for future reference.

In deciding when to charge the credit card, allow the same amount of time for the card to be charged as you would for a paper statement to be remitted. For example, allowing three weeks before the credit card is charged makes the patient part of the process, which may include an appeal. Remember that you do have a personal guarantee that the bill will be paid in a timely manner.

Build into the agreement the provision that should a card have been canceled, an effort will be made to contact the patient before the account is turned over to a collection agency.

THE GRAND INTRODUCTION

First impressions are everything and lasting. The success of a new financial policy requires careful planning around who introduces it and when.

Some practices introduce the new billing method by applying it to all patients, regardless of their insurance plans and balances. Others apply the new rules only to new patients or those who have past balances due. Some offices are more concerned about payment policies for high-dollar procedures, surgeries, treatments, or other larger amounts that can be broken into affordable segments.

Get the buy-in from physicians by sharing reports and documentation with them so they understand and affirm the need to adopt financial policies that work for your office. For example, if a large percentage of your patients have high-deductible policies, that makes time-of-service collections important. Show physicians time-of-service collection reports and patient demographics that reflect the number of high-deductible patients so they understand the impact.

VULNERABILITY AND PAYMENT

Someone in your billing department should always be available to speak with a patient privately regarding his or her financial responsibility and, with the patient present, should be willing to contact the insurance payer regarding eligibility and specific treatment plans needed.

A patient can feel incredibly vulnerable as he or she enters a room to establish a payment agreement. Keep in mind that patients base their expectations on previous experiences. They may have no idea what to expect and more than likely are not aware of the true cost of healthcare. Your job is to create the easiest and most comfortable setting with each step and level of the patient experience, including what their financial obligations are according to their coverage.

Using card-on-hold options allows you to approach patients with realistic and fair policies that will help your patients meet their financial responsibility in a secure manner. A fair card-on-hold policy can ease the process by automatically charging a patient's card for a copay or for a prearranged amount with each visit.

Help buffer the shock of seeing a bill by making it a manageable situation. It would be a pleasant change of perspective if patients saw our bills as predictable as a phone bill with an automatic payment within a fair amount of time. Patients can separate the money from the care and relax so they may concentrate on their health.

As you update your financial policy, reinforce credit card policies by furnishing paper or electronic copies to patients for later reference in the comfort of their homes. This will certainly lead to a few more phone calls, but this is what you want: patient education and engagement. You are laying the groundwork and foundation of your expectations and their financial responsibility. Building an emotional intelligence with every step of collections will only improve patient receipts.

Because insurance companies sometimes deny a claim in error, you must be 100 percent sure that any responsibilities transferred to the patient by the insurance are indeed valid before you process the patient's credit card. This is another reason to allow time for a card to be charged, not upon the initial explanation of benefits/explanation of payment.

EFFECTIVE SIGNAGE

As you design and display policies and requests, avoid barrier words like *never*, *must*, *do not*, and *required*. Good manners always help to soften a message. For example, a sign requesting payment at the time of service can read *Payment is requested at the time of service. Thank you*. This is much more respectful than *Payment is required*. Another example is *Please check out with the receptionist before leaving. Thank you*. That's gentler than *You must...*

Politeness costs nothing and should be part of every relayed statement. Cold messages can elicit defensive reactions that do not benefit patient care or a desire to remit for your services. Remember, patients are grading the entire practice and the value received as they determine where their

healthcare dollars will go. *Please* and *thank you* go a long way to tempering someone's attitude.

Notices will be noticed more easily if they are located in one "framed" area as opposed to several scattered ones. Ask vendors about the availability of multi-lingual statements and other financial information such as payment options and agreements.

Provide printed brochures on patient financial options in strategic locations. You will be surprised how many patients will actually pick up a brochure and read it.

LEVERAGING YOUR WEBSITE

Your website is the perfect venue for providing financial information for patients to review before they walk in your door.

Forewarned is forearmed, and this is also true regarding financial obligations. Use understandable language that directly relates to patients with high-deductible policies, or under/uninsured patients. Consider: *If you have a high-deductible or are a self-pay patient, please call our office today to discuss your specific benefits.*

Allow patients to use the website 24/7 to establish a payment plan if they so choose. Being available to accept payment at any time with as many options as possible is a clear sign of emotional intelligence toward your patients. Easy access and transparency in billing practices are welcome features of a user-friendly website.

THE BILLER

We are all dependent on the biller's discretion when they determine a claim denial's next step. I had to contact my doctor's billing department to let them know that my labs should be included in my physical as a wellness benefit and to re-file the claim. Shouldn't they know that *already*? These are basic things that we are aware of, but most patients are not. It's our job to protect our patients in every way we can, including with claims.

While we would like to believe that all of our billers are working at their best all day, I am confident that as in any position, some simply may not make as concerted an effort as others. We often don't catch these errors until it's too late and almost impossible to go back and track every single occurrence with any particular claim or employee. It's like finding a missing book within a library with millions of volumes. It is often too daunting to audit every single past transaction.

However, a biller's error can lead to patients' distrust of the practice. It is your responsibility to administer the patient's plan as best you can for the benefit of the patient. Insurances, as we know, do not typically reimburse 100 percent correctly 100 percent of the time. Until then, your central goal is to protect the patient, first and foremost.

Keep in mind that sometimes collectors identify strongly with the patient, creating barriers to collections. For example, a patient has a balance from a past insurance denial stating "non-covered" even though their insurance company told them it was covered, or the patient has a bad debt that needs to be paid before an appointment may be scheduled.

At times, a collector can over-identify with the patient who appears to be helpless, and then become too empathetic, seeing the patient as a victim. The collector may be more forgiving regarding an already overdue balance that instantly reduces the overall potential of collecting 100 percent of the amount due.

The collector's self-management skills can help him or her calm a patient's distress before the situation leads to a more lenient negotiation.

CHECKOUT

A pleasant demeanor is most valuable in the person assigned to check out patients, and can have a substantial impact on your revenue cycle. Not everyone is comfortable asking patients for money. This role typically is filled well by someone who has self-confidence and is not afraid to speak up.

We had a wonderful person at the checkout desk who was a stellar employee. The only problem was that her key phrase as she greeted patients was, "How much do you want to pay today, Hon?" Needless to say, they said, "Nothing," and we were left to wait for payment upon their receipt of a statement.

It can be extra challenging for someone at checkout to collect at the end of an impossibly long visit where, for example, the patient had to wait hours to be seen, through no fault of their own. A perfect example? "If you think I am going to pay a dime after I've waited over two hours with my stepmother to see an oncologist for final results to see how long she's going to live, you've got another thing coming!"

They may be even less likely to pay when no staff member at any time at least acknowledged and possibly apologized for the issues.

Displaying and relaying empathy is our job, so, given this scenario, one short statement from the receptionist relays compassion: "I'm so sorry you had to wait for so long. I know you were here longer than we had planned." Simple, kind, and polite honesty goes a long way.

Because the average high-deductible plan easily involves thousands of dollars, patients are responsible for at least the initial visits and evaluation — and for many of our patients that equals self-pay.

The focus on time-of-service collections leads to increased responsibility at the front, with a patient advocate to assist when needed. The front desk and billing department can identify the type of patient and what appears to be a comfortable money amount before requesting that the patient meet with a billing staff member.

Include both the front and billing staff members as a part of these important conversations. Emotional intelligence tells us that those who have a role in negotiations are more likely to be an active part of the change versus just following orders.

Receptionists can feel like the hamster in a wheel. They just keep going and going and don't see the progress or results of their hard work. We all have to feel success with our work, finish projects, and see the reward. The front desk schedules the appointment, checks in the patient, collects money, and enters demographic information. Your patient's visit literally begins and ends with these staff members. The front desk staff know

how patients may be approached when they are not feeling well or when they just had a crisis. That is emotional intelligence, the awareness and empathy toward each and every patient who enters the door for his or her specific problem.

Yet they do not see the end result of their work, which might have served as affirmation of their value in the workplace. The emotionally intelligent leader lets staff know how their work affects the patient flow and medical practice processes. That way, we all feel and share in the success.

There are many receptionists that will tell you they recognize a patient's car in the practice's parking lot. We know patients that well and are proud of it! That is a pride that patients trust and that promotes their payment!

WHAT CAN YOU DO NOW?

- Observe the support between your billing and front desk departments. Use your emotional intelligence to train your staff to give each other total support in each of their roles, and they will truly work as a team at full potential for patient collections.
- Establish card-on-hold payment plans that are fair and workable for your patients ... and predictable for you! Speak with everyone in your billing and business department who has ever collected money.
- Gather information about the best way to approach your patient population — it's essential to getting this program off the ground with success. Emotional intelligence will assist in your information gathering.
- Consider training in emotional intelligence for financial profitability. Being in tune with each other and your patients can assist in your advancing collections, especially with time of service at the front desk. Training can be online, in person, or virtually, and can be designed to address your specific situation and patient base.
- Keep physician leaders apprised of your implementation and success.
- Consider conducting a patient survey or asking a ghost patient to present an objective evaluation of you by viewing your website, scheduling an appointment, and checking out.

Staff members should feel a reward for what they do; that's what keeps them going. We all need to feel value with our work, and we are in no better industry to experience this. We help people heal, and that can be an incredibly bonding experience. Let those caring moments bring you together to treat the entire patient, including their financial health.



Susan Fink Childs, FACMPE, is author of *Common Nonsense?: A Practical Guide to Managing Through Emotional Intelligence*, and founder of Evolution Healthcare Consulting, Raleigh, North Carolina.

schilds@evohcc.com