

## Health Policy Forums

### Patient Friendly Billing: Increasing Transparency

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*June 10, 2009*

Billing can be the most complicated aspect of health care and can be frustrating and even alarming for patients. Geisinger, one of Pennsylvania's largest health systems, has made noticeable strides in the past few years to develop a nationally recognized Revenue Cycle that is user-friendly, transparent, standardized, and effective.

Kevin Brennan, Executive VP and CFO of Geisinger Health System, openly shared his insights and lessons learned when he spoke at the Health Policy Forum last June. He first provided an overview of Geisinger Health System, which is an integrated delivery system serving the north central and northeast section of PA. The semi-rural region is home to Geisinger's major hospitals, surgery centers, physician group practices, and a drug and alcohol treatment center. There are currently approximately 500,000 people who access Geisinger Health System regularly. Geisinger is truly an integrated system with a common board of directors, an incentive-based infrastructure, and a centralized billing office. Additionally, Geisinger is also home to its own managed care companies.

Geisinger's growth began to flourish after 2001, when re-organization led to a strategy where growth became a strategic imperative. There was an increased awareness of new collection opportunities; a more activated consumer base; and the development of an electronic infrastructure.

All these differentiating factors contributed to the backdrop leading to improvements in Revenue Cycle processes.

Mr. Brennan emphasized Geisinger's quest for a transparent system, in part driven by the societal expectation of transparency. Early on in the development of a new fee system, it was important to be upright and have measureable improvements. Some of the more important implementation revenue cycle components included: financial/reimbursement analyses; technology tools; market pricing vs. cost analyses; and collaboration across the enterprise. The intention was to have justified, market-based, line item pricing while increasing simplicity. The outcomes focused on a consolidated charge description master; defensible pricing; and improved regulatory compliance.

Mr. Brennan explained the challenge in this process, which inverted many of the historic patient communication processes. In a typical revenue cycle, most business happens at the back end, sometimes long after a transaction or service has taken place. Geisinger has worked very hard to engage patients early on in their pre-service model.

First and foremost, Geisinger patients have direct access to their electronic health records (EHR) and a host of other online resources. This online interaction can function in a variety of ways for

patients and providers: patients can update personal demographics, request an appointment, obtain a referral or refill a prescription, and contact a provider via secure email. Additionally, patients can access pricing tools, review their statement and pay their bill online.

Second, Geisinger discusses financial issues (including charity policies) with patients upfront and in advance of the service. An advance fee notice includes: orders on a standardized form; charges associated with the service; estimated out-of-pocket expense; a disclaimer; and time frame for which the quote is valid.

Related to this, Geisinger's online Advance Fee Notice Estimator is a compilation of their top 100+ procedures and insurer benefit information coordinated with their most common carriers. This allows the patient to obtain an estimate on a service instantly. Geisinger also offers a hotline number to assist patients in answering questions regarding fees.

Geisinger will continue to utilize and grow its technological infrastructure, analyze the advance fee notice system, critically review patient satisfaction and analyze its return on investment. ■

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