



EHR, PRACTICE MANAGEMENT,
AND FINANCIAL SOLUTIONS

Three Steps to Easier Patient Visits and Better Practice Outcomes

nextgen[®]
healthcare

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In this e-book, you'll learn strategies to avoid missed revenue and save staff time by using smart efficiency improvements, such as checking insurance information up front. You'll also learn how you can get back to caring for patients, not chasing payments—and the secret to achieving strong financial outcomes. Finally, you'll discover how you can get paid quickly, easily, and fully—all while addressing your patient demands for an improved, more efficient experience.

Today's patients want easier, more efficient visits with their primary care providers

Many patients are frustrated by long wait times and practice inefficiencies. They feel their care quality suffers when providers are too crunched for time. They want simpler payment processes and more transparent billing.

Meeting patient expectations is the cost of doing business.

Your primary care practice can save time and money by delivering on patient expectations. You can enhance your ability to keep up with regulatory demands and reporting requirements—and avoid unsatisfied and unresponsive patients—when you employ best practices that address patient needs.

STEP 1

SIMPLIFY YOUR CHECK-IN PROCESS AND ENHANCE THE PATIENT EXPERIENCE

Prevent missed appointments to save time and money

When patients fail to show up for an appointment—or find the office visit experience frustrating—your practice loses time and money, while also risking patient loyalty and satisfaction.

There are two easy ways to fix these issues:

- 1 Simplify the check-in and check-out process
- 2 Use proven tactics to improve patient engagement

It's easier than you may think to achieve both.

Today, tools are available that allow your patients to fill out paperwork and new patient forms in advance of their office visit, electronically. By using these tools, staff can avoid manual data entry and resulting errors. They also help streamline visits and reduce frustration while improving patient satisfaction.

Another way to boost patient engagement and reduce missed appointments is by using patient communication tools. The right patient portal can help your staff expedite and automate communications, such as appointment reminders, balance due alerts, and referral paperwork. Plus, you can engage with patients in the manner you prefer—via text, phone, or email—leading to happier patients, reduced staff burden, and a more efficient overall office process.

Avoid missed revenue and save staff effort—check insurance information up front

When your practice uses the right tools to check insurance eligibility before or at the beginning of a patient visit, you can avoid denied claims, expedite copay requests, and ensure more accurate billing information. This is particularly important now that most patients have health savings accounts and high-deductible health plans. These plans make it more expensive to manage chronic illnesses and often demand patients pay out of pocket for prescriptions, office visits, and diagnostic tests until they reach their deductible.



Reduce the frustration of high-volume patient workloads with configured, productive efficiency

Careful visit planning and easy documentation effectively move patients through your practice and help avoid documentation back-ups. The bonus of doing it well? Increases in physician productivity.¹

Your practice can simplify and streamline patient flow and form processing. Another way to avoid backups is to offer virtual visits.

Finally, your practice can streamline front-and-back-office administration—and more efficiently manage the business of healthcare—using integrated eligibility checks, claim status verification, clearinghouse functionality, patient portal conveniences, and messaging solutions.



Regularly ask your health solutions vendor for information on new techniques or offerings that improve patient flow.

Seek out tools that:

- 1 Notify staff when a patient has arrived and keep patients moving
- 2 Enable physicians to document efficiently and easily between patients
- 3 Securely exchange patient data²

STEP 2

IMPROVE TIME MANAGEMENT AND REDUCE RESOURCE DRAIN

Primary care physicians are not exempt from the scourge of healthcare burnout. Factors such as changing reimbursement models, rising education costs, unrealistic productivity demands, strenuous EHR tasks, and career expectations vs. the real work environment contribute to overburdened physicians, decreased patient satisfaction, and lower care quality.²

**Boost patient and staff satisfaction
by finding time to treat patients
more effectively.**

When your primary care practice communicates with patients effectively, everyone saves time and avoids frustration, and outcomes improve. Get there by leveraging portals, virtual visits, and advanced messaging tools. The most up-to-date EHR solution, practice management (PM), and patient portal tools can help you standardize procedures and processes, while streamlining workflows.



The right patient portal can:

Improve provider/patient communication by helping reduce data-entry demands, prevent resulting errors, lessen staff interruptions, expedite patient check-in and appointment scheduling/reminders, and streamline patient visits.

The right EHR solution can:

Streamline charting, tailor clinical workflows, save staff time, and reduce time spent searching for data.

The right PM solution can:

Create workflow efficiencies across the revenue cycle that result in real operational and clinical improvements. It can streamline scheduling, centralize staff calendars, be configured to meet the needs of individual clinicians, save time via eligibility checks, and expedite patient and productivity reports.

The right consulting solution can:

Optimize your business and healthcare solutions while leveraging medical best practices. Professional consulting can help you determine the best way to consistently solve clinical and administrative challenges for better outcomes.

Keep up with regulatory demands and reporting requirements

The regulatory and reporting demands on today's practices are ever changing and increasingly challenging. The good news is—you can make documentation easier. Before a physician treats a patient, empower assistants and other staff to handle patient reminders, injury history, patient education, and quality documentation.

The right EHR, PM, financial, patient portal, interoperability, population health, and analytics solutions can help you streamline charting and documentation. Your financial, population health, and patient portal solutions should help you monitor your business with easy reporting and benchmarking.

Your interoperability solution should help you easily exchange health information from within the clinical workflow and at the point of care.

STEP 3

STREAMLINE COLLECTIONS AND SOLVE BILLING ISSUES

Today more than ever before, practice revenue is coming from patients. With healthcare premiums exceeding the rate of inflation annually for the past 14 years, better-performing practices are taking every step possible to minimize bad debt and optimize collections.

Thus, it's important to proactively bill patients and collect balances at every opportunity. It's clear that no amount of cost cutting can compensate for inadequate patient collections. Luckily, there are proven collection processes that can help overcome these payment roadblocks.

Implement the wrong billing and collections technology (or use the wrong mix), and you'll likely face a significant loss of productivity, slow reimbursement, and underpayments. If you're not sure where you stand, it's time to ask for expert help.

Simplify payment processes and provide transparent billing

Making patients happier and increasing their likelihood of paying may be as simple as using transparent billing processes, much like those you see with household bills. How do you get there?

You can:

- Provide a convenient, reliable way for patients to understand their payment responsibilities before scheduling service or treatment (deliver a full breakdown of costs up front)
- Proactively discuss payment plans and financing options
- Send appropriate balance reminders
- Leverage up-to-date technology, like kiosks, to improve up-front collections

Motivate your patients so everyone wins.

Due to a growing increase in patient payment responsibilities, providers can only expect to collect 50 to 70 percent of a balance after a patient visit.³ Because patients pay their balance slower than third-party insurers, providers must incentivize patients to resolve balances quickly—ideally at the time of service.

How can you successfully incentivize your patients to pay?

Enable electronic transactions to lower operating costs and increase payments.

Leverage automation to send patients timely statements and balance reminders by phone, text, or email. Don't wait until weeks after an appointment to bill for remaining balances.

Accept multiple forms of payment and offer more than one way to pay (at the time of service, online, by phone, via payment plans, or through automatic debiting). These approaches improve cash flow, increase collections, and lower write-offs.⁴

Get back to caring for patients, not chasing payments

Look for a health solutions partner that offers an integrated EHR solution and PM software in conjunction with a full suite of the top collection management technologies that support a patient-centric revenue cycle management approach.

The secret? Successful denial prevention.

Using a robust suite of patient collection tools is essential. But to thrive, not just survive, look for a partner that will complete your revenue cycle workflow with top-tier solutions that ensure all third-party payer claims are accurately submitted and reimbursed according to contract.

To be successful in claims management, focus on denial prevention rather than denial management—and on working with a partner that can deliver the right level of customized support along the way.

Get paid quickly, easily, and fully

Empower your primary care practice to share payment-related information with patients in smarter, more personalized ways, using their preferred method of contact. Using the right tools, you can submit claims more quickly and accurately, better manage the full patient collections process, and automate time-consuming tasks across the revenue cycle (such as generating claims, running reports, and printing statements).



DISCOVER A BETTER WAY

Deliver a better patient experience

By simplifying your check-in and check-out processes, updating front-and-back-office administration, improving patient “flow,” and using proven tactics to enhance patient engagement, your patients’ experience—and clinical and financial outcomes—can improve.

Standardize and streamline processes for results

When your practice communicates with patients effectively, everyone saves time, improves outcomes, and avoids frustration. The most up-to-date EHR solution, PM, and patient portal tools can help you standardize procedures and processes, while streamlining workflows.

Meet regulatory and reporting requirements with ease

The regulatory and reporting demands on today’s practices are ever changing and increasingly challenging. The right EHR solution, PM, financial, patient portal, interoperability, population health, and analytics solution can help.

Take a patient-centric revenue cycle management approach

Making patients happier and increasing their likelihood of paying may be as simple as using transparent billing processes, much like those you see with household bills. You can get there by enabling electronic transactions, leveraging automation, and accepting multiple forms of payment. In addition, the right partner can provide an integrated EHR solution and PM software in conjunction with a full suite of the top collection management technologies that support a patient-centric revenue cycle management approach.

Shift the focus from denial management to denial prevention

To be truly successful in claims management, you must focus on denial prevention rather than denial management—and on working with a partner that can deliver tailored support along the way. Using the right tools, you can submit claims more quickly and accurately, as well as better manage and automate the full patient collections process, and automate time-consuming tasks across the revenue cycle (such as generating claims, running reports, and printing statements).

BETTER STARTS HERE.

Contact us at 877-523-2120 or ngosalesteam@nextgen.com.

Choose a targeted solution from a strategic partner

Partner with NextGen® Office and discover everything you need to simplify patient visits and improve practice outcomes.

1 Debi Croes. "Streamline Patient Visits." Physicians Practice. Last updated June 1, 2003. <http://www.physicianspractice.com/operations/streamline-patient-visits/page/0/1>. **2** Meredith Victor Castin. "Physical Therapy Burnout is Destroying Our Profession." October 18, 2017. <https://covalentcareers.com/resources/physical-therapy-burnout/>. **3** Trends in Healthcare Payments Annual Report: 2015. InstaMed. <https://www.instamed.com/blog/trends-impacting-the-healthcare-payments-market/>. **4** "The Three Best Practices to Follow in Healthcare Patient Payments," JPMorgan Chase & Co. <https://commercial.jpmorganchase.com/pages/commercialbanking/industry-expertise/healthcare-patient-payments>.

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