

FUTURE OF PATIENT FINANCIAL ENGAGEMENT

OCTOBER 5, 2017

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Mark Archer, Noggintechs
Steve Kramer, ACI Worldwide



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Agenda

1. New threat to your financial security
2. Examples of analytics increasing collections
3. Patient demands
4. How to get started
5. ROI

Today's Speakers



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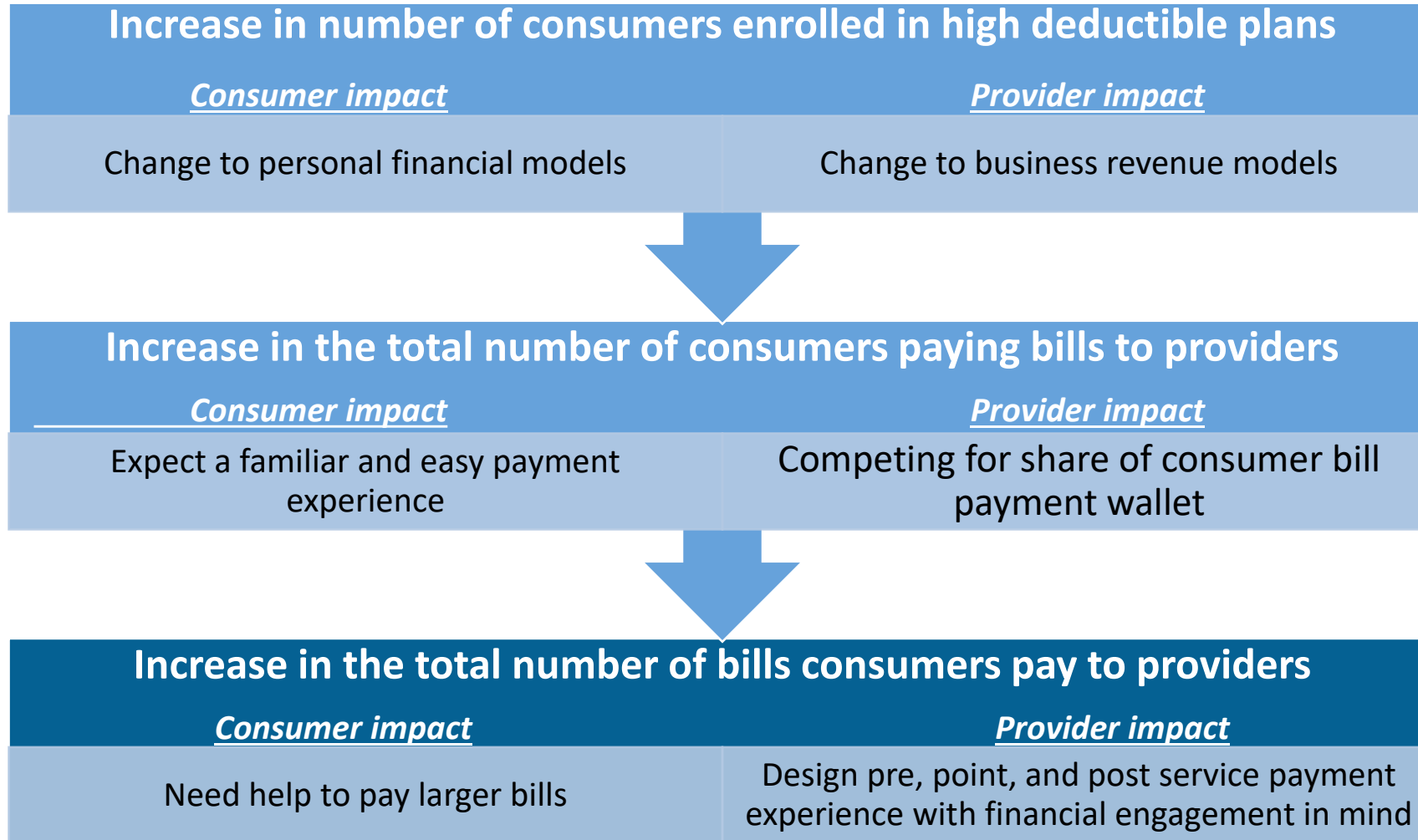
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New Threat to Your Financial Security

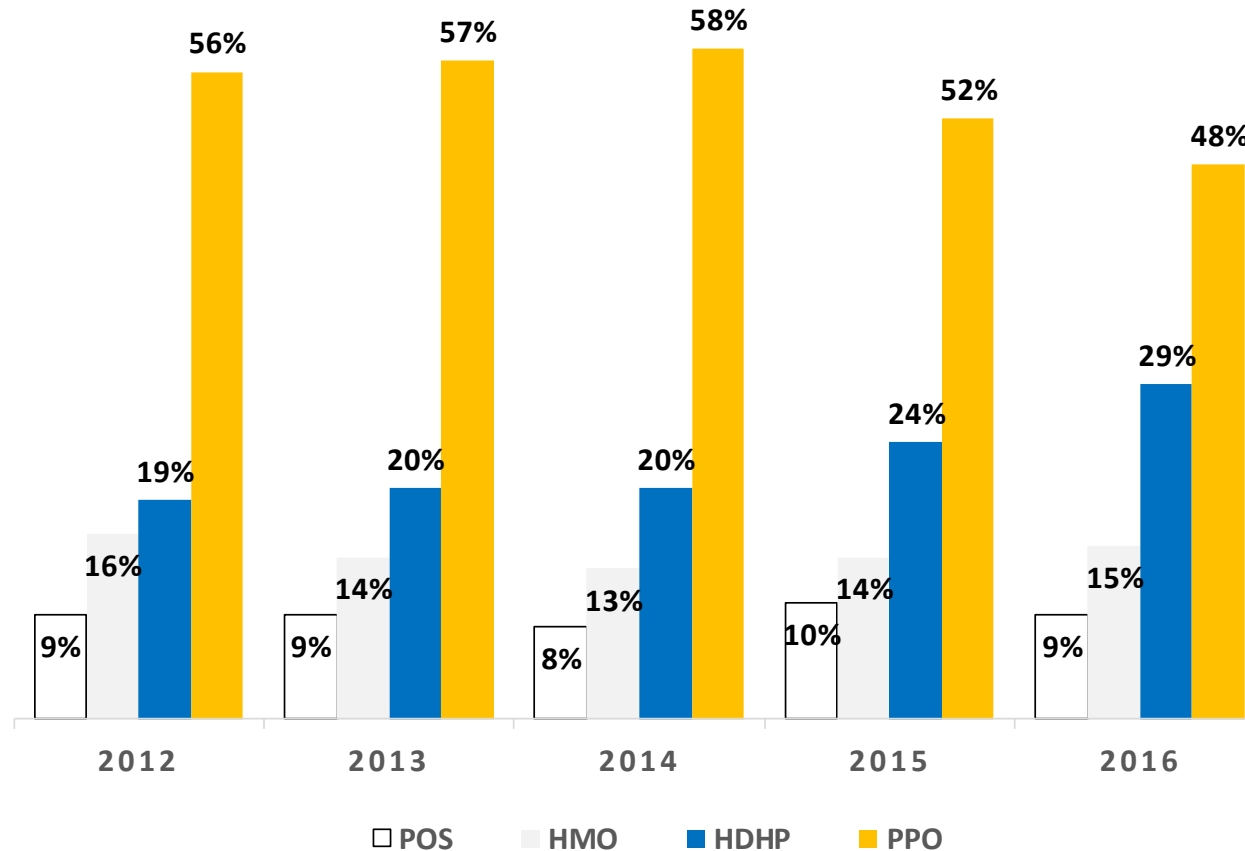
Aite Group

New High Deductible Plan Market Dynamics

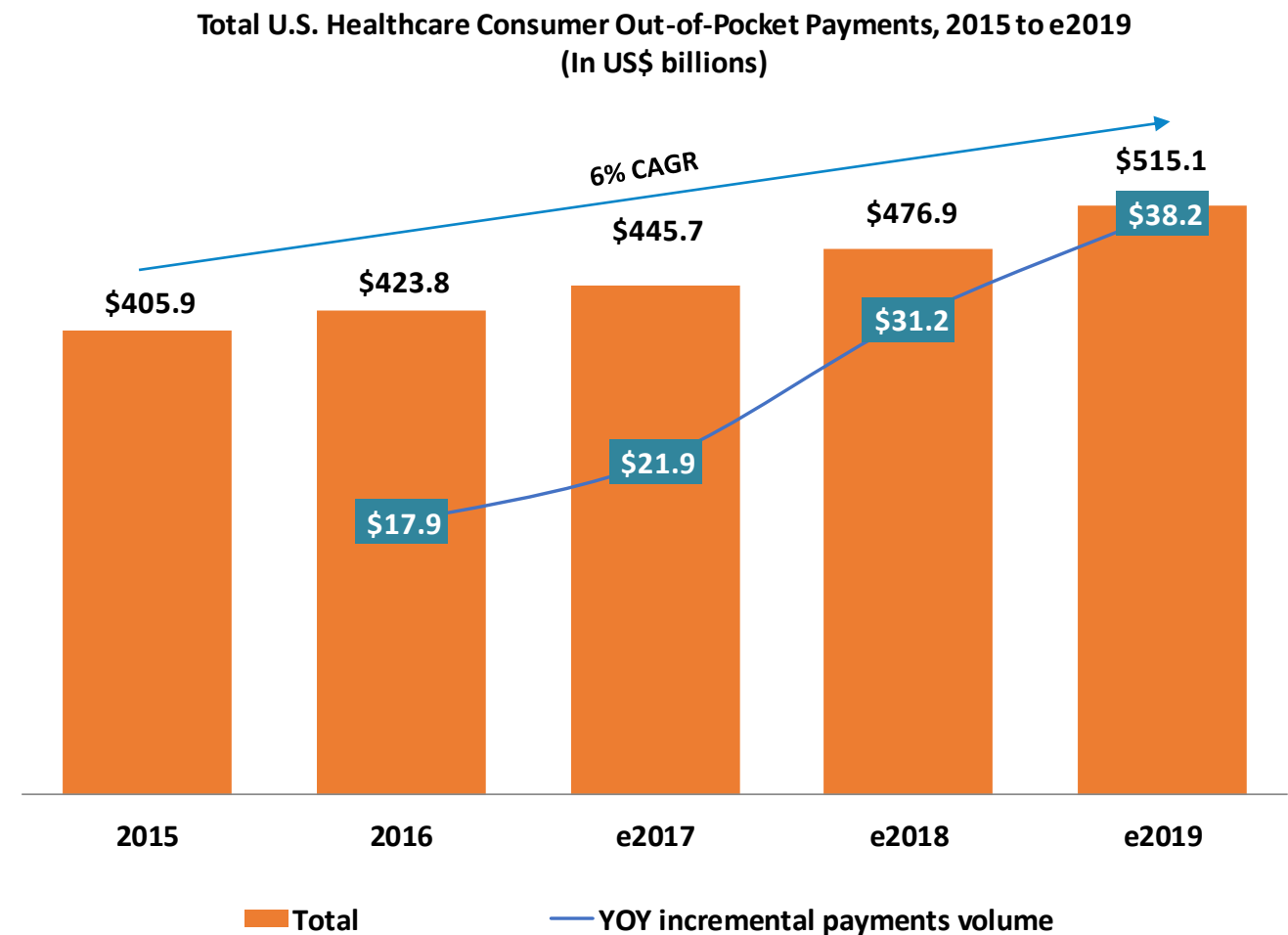


Changes to Providers' Patient Populations

Distribution of Health Plan Enrollment for Covered Workers
by Plan Type, 2012 to 2016

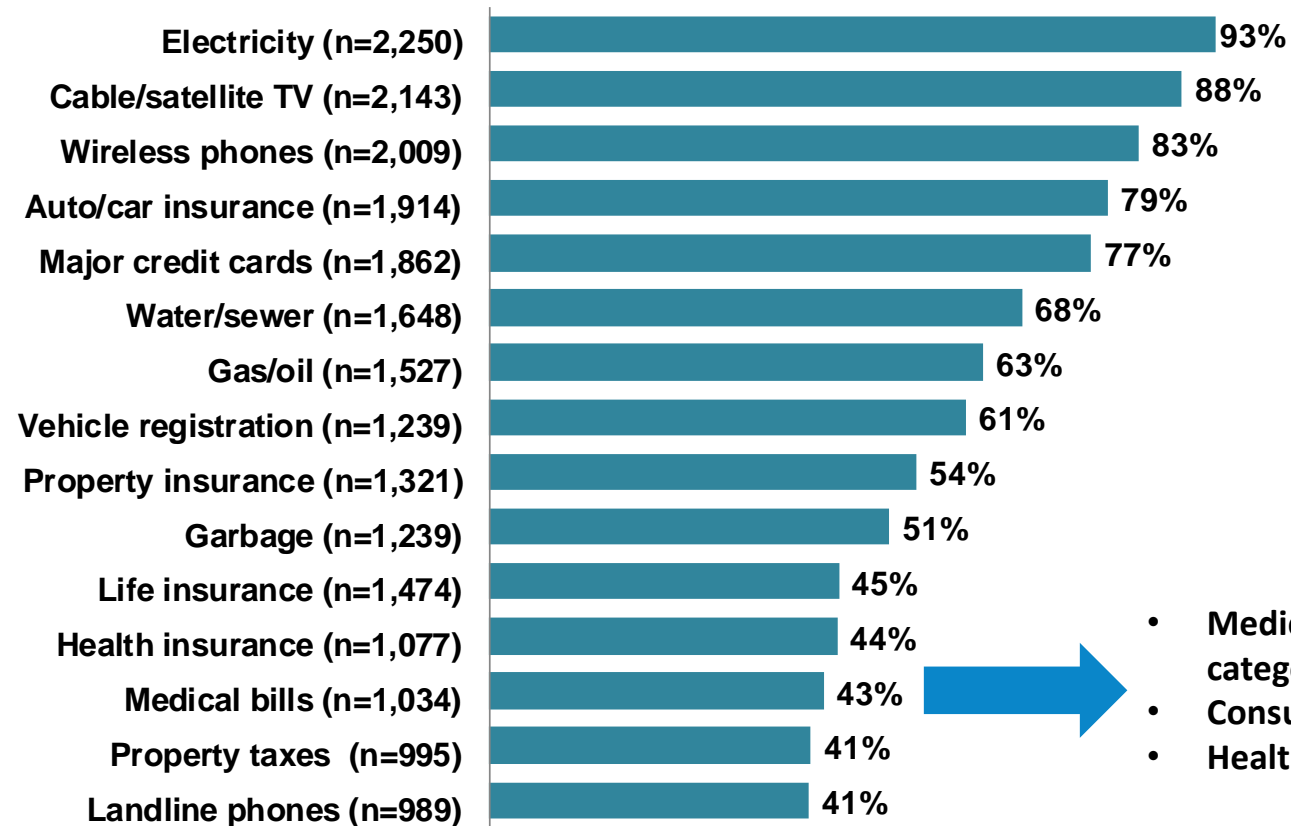


Consumer Emerging as a Strong Third Party Payer



Consumer's Bill Payment Wallet

Q. Which of the following bills do you pay or have you paid in the last 12 months? (N=2,429)

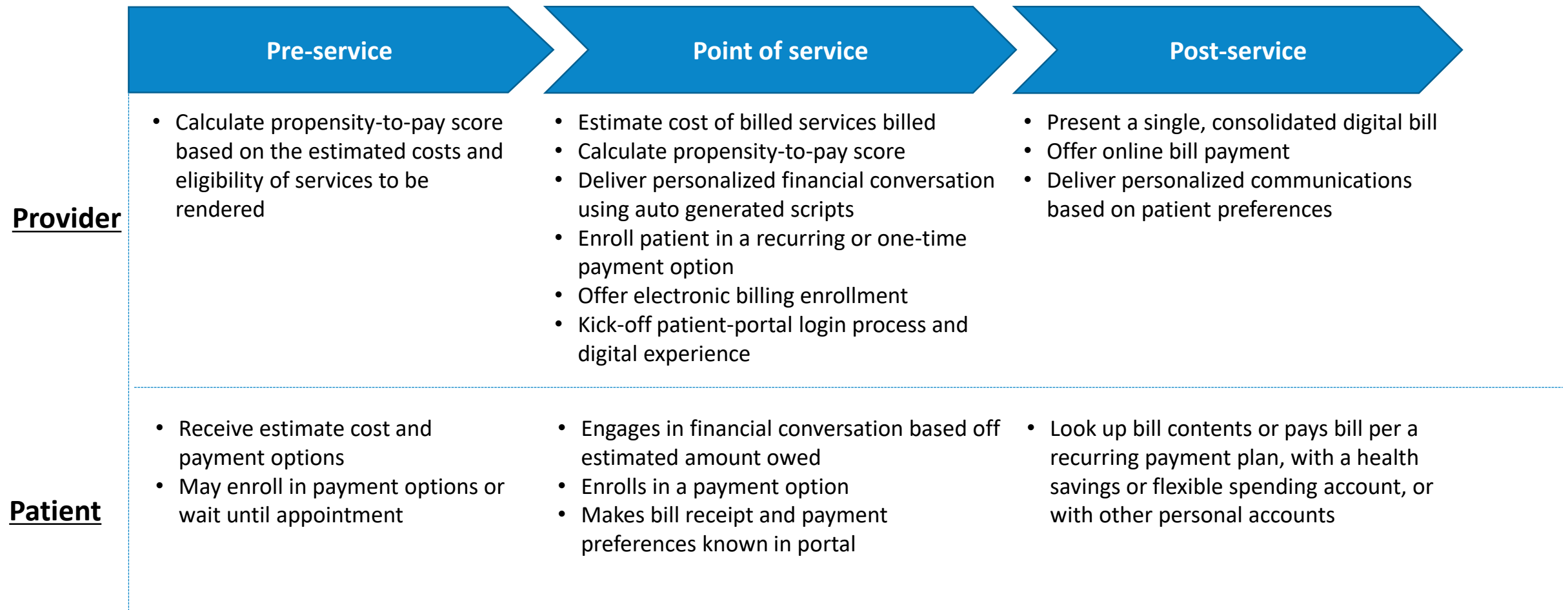


- Medical bills are the 13th most frequent bill a consumer pays out of 29 categories
- Consumers other bill payment experiences into healthcare
- Healthcare is not easier for consumer to pay than these other bills

Current Pay & Chase Practices Unsustainable

- **30% of patients walk out of providers' doors without paying anything**
- **Patients average 3.3 billing statements before paying an outstanding balance**
- **Collection agencies recover \$16 for every \$100 owed**

The New Patient Engagement Model – Personal and Digital



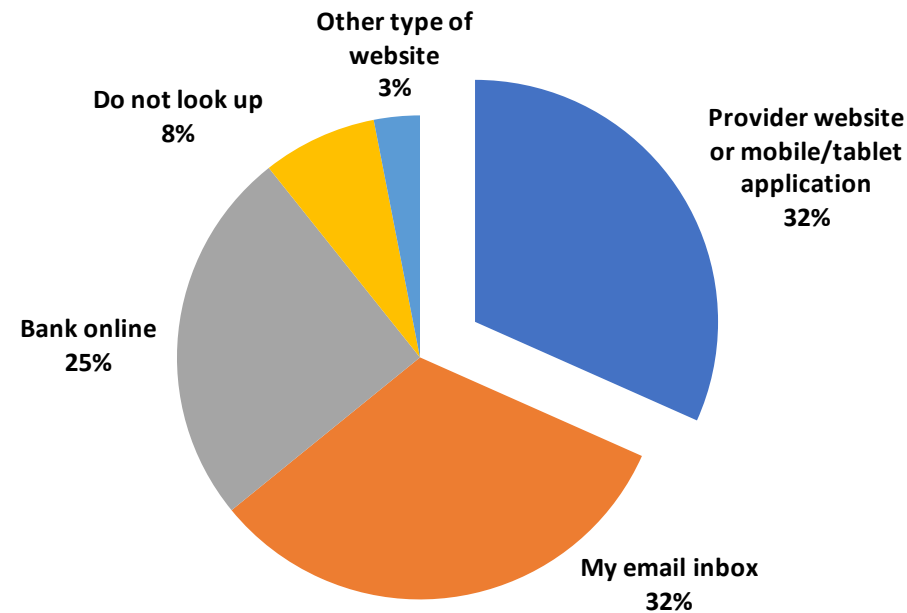
Poll

How do you determine how much a patient can pay?

Bills and Payments are Digital Engagement Levers

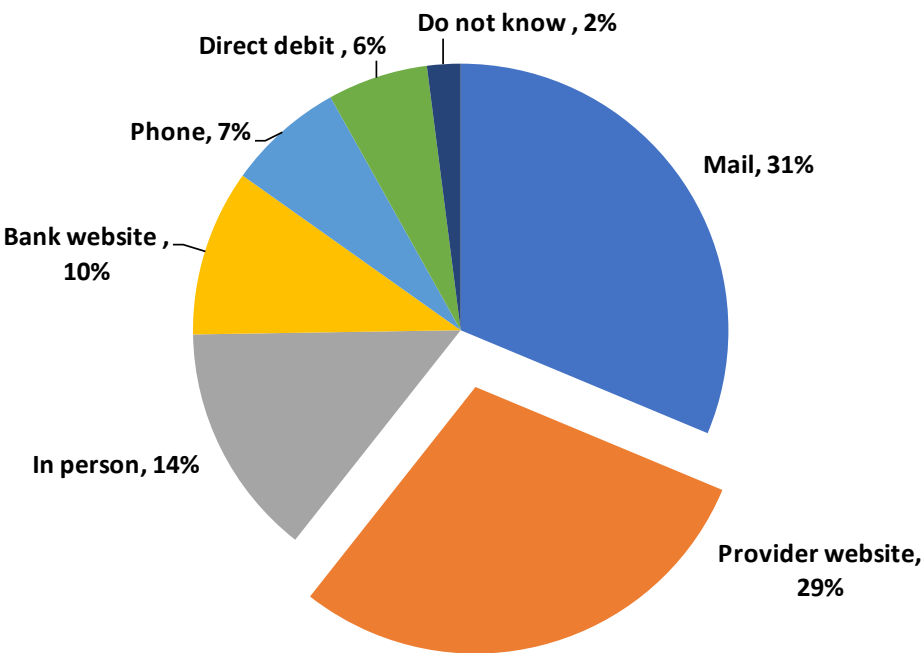
Bill

Q. Where do you typically go to look up your electronic medical bill? (n=1,909 bills)



Payments

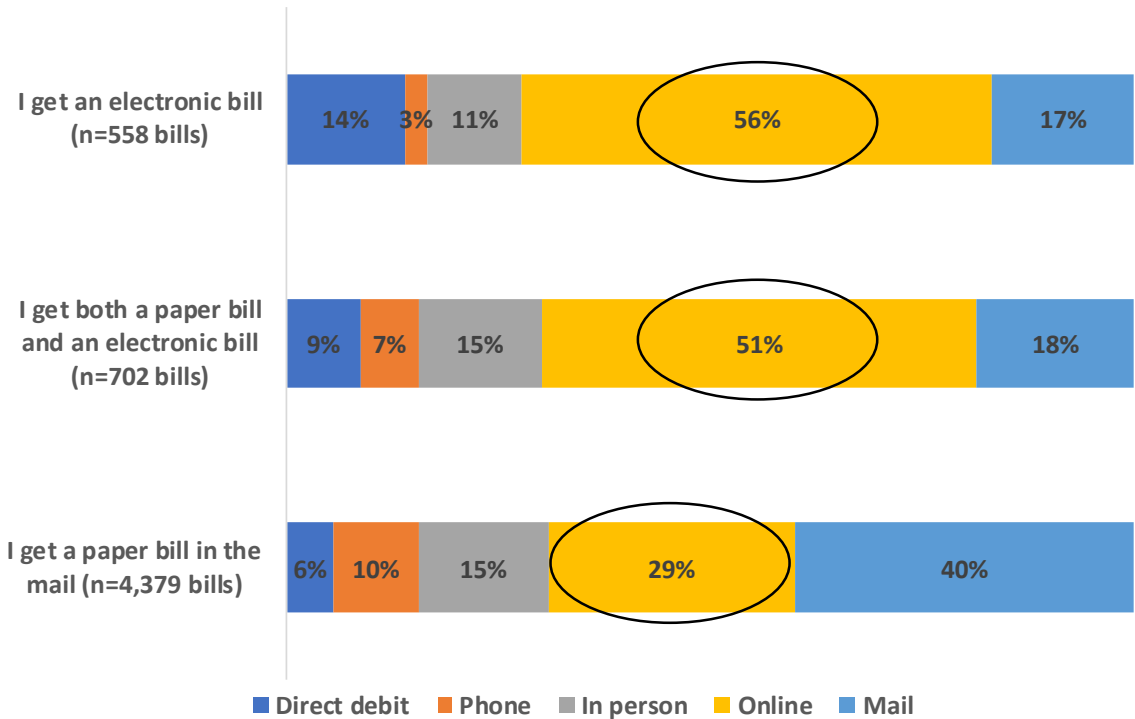
Percentage of Consumer Out of Pocket Medical Bill Payment GDV by Channel



Digital Bills lead to Digital Payments

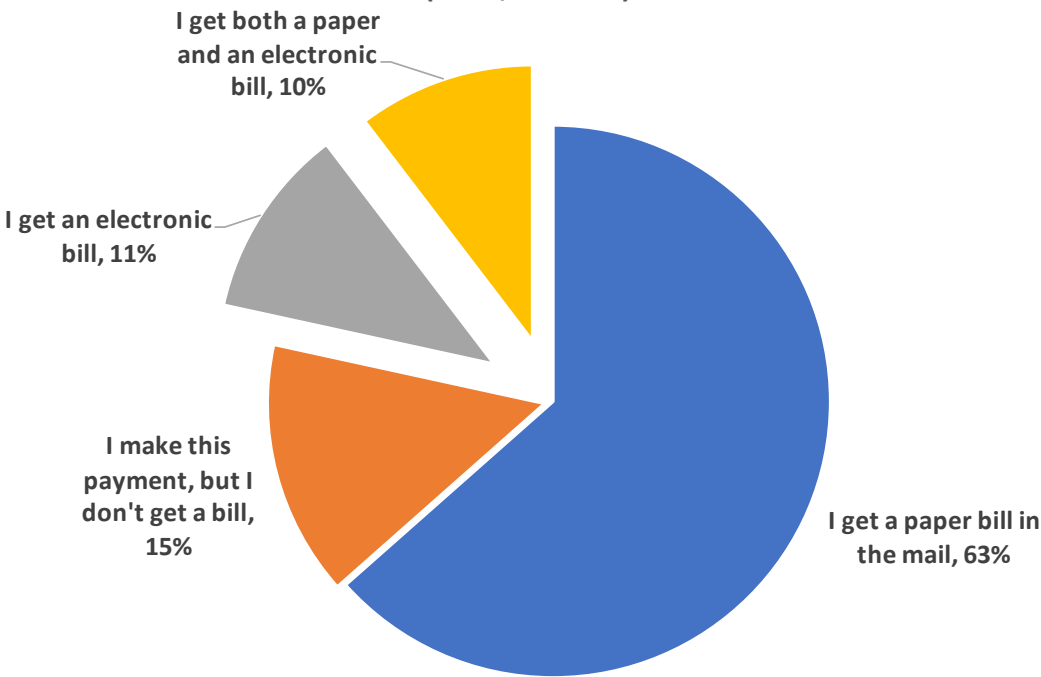
Digital bills lead to digital payments

Payment Channels Used By Type of Medical Bill Delivery Medium



Digital bills lack penetration

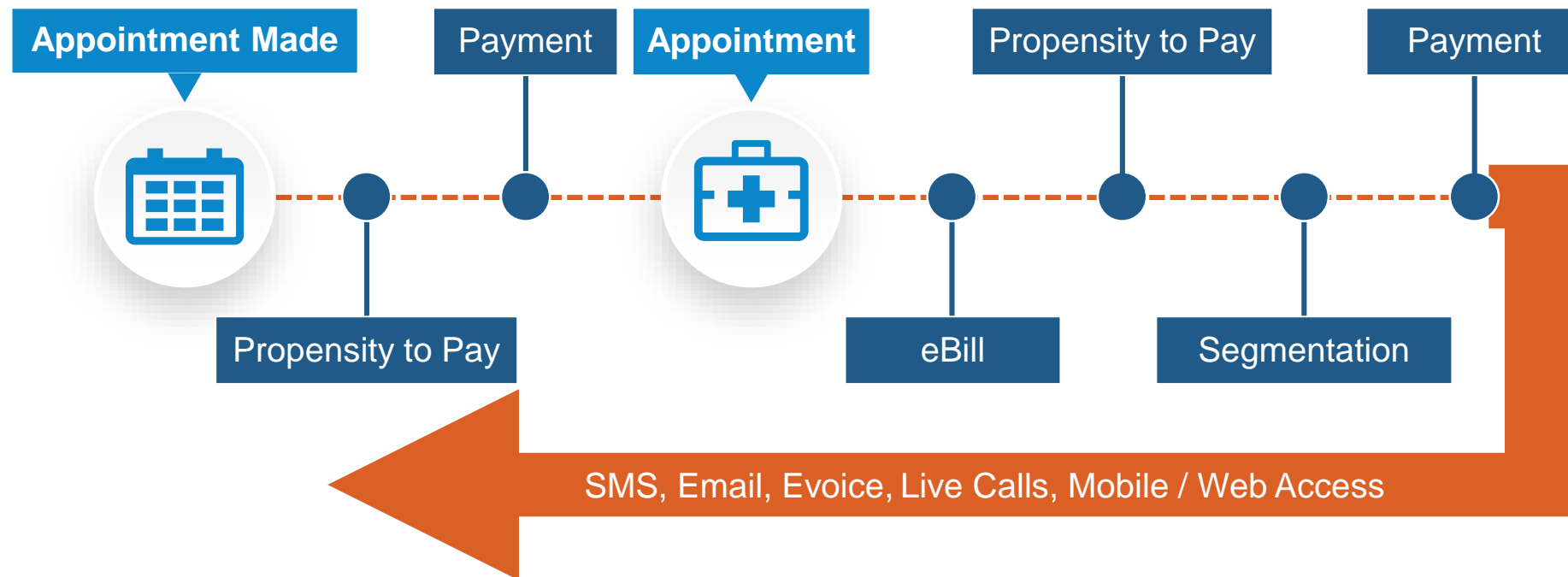
Q. How do you currently get your health insurance bill? (n=11,624 bills)



Examples of Analytics Increasing Collections

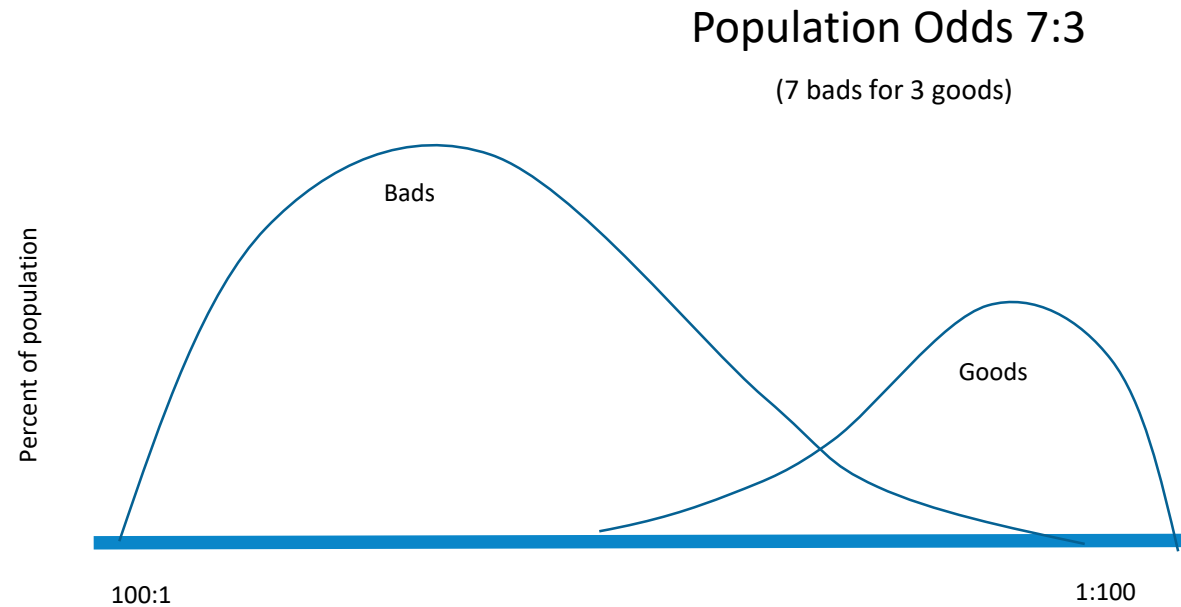
Noggintechs

Improving The Entire Patient Revenue Cycle



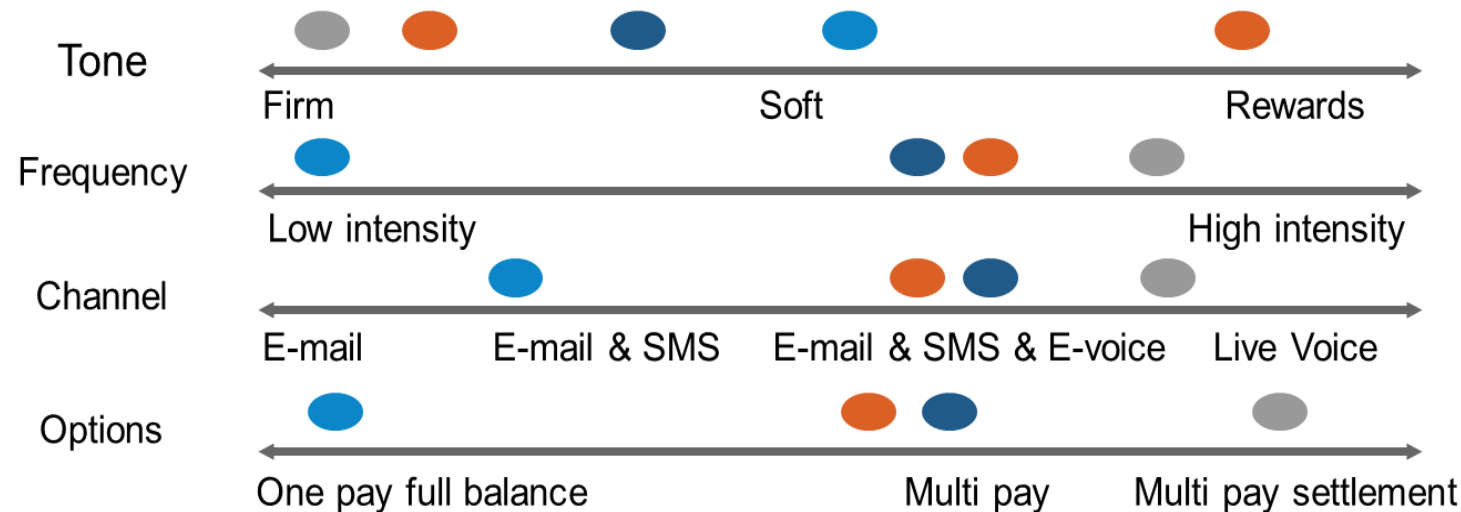
Bringing Intelligence to Medical Debt Collection

Propensity to Pay – Patient Strategy Foundation



How to Think About Segmentation and Actions

Segmentation		Ability to Pay	
		Yes	No
Willing to Pay	Yes	Forgetful	Struggling
	No	Entitled	Problem



Drive patients to set up payment plans and settlements, and capture ongoing payments

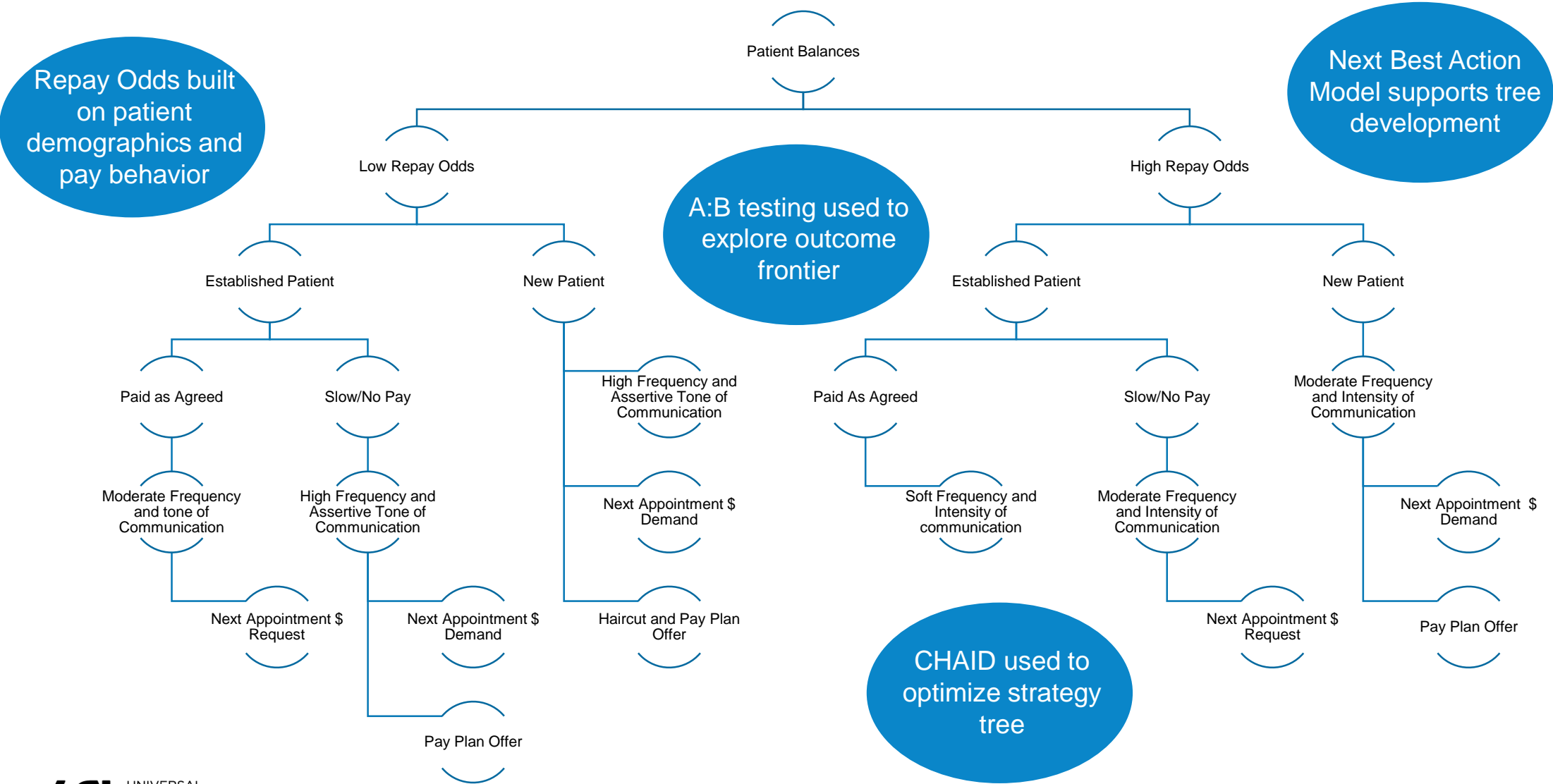
Poll

When your staff talks to a patient, which of these do they change based on patient's ability to pay?

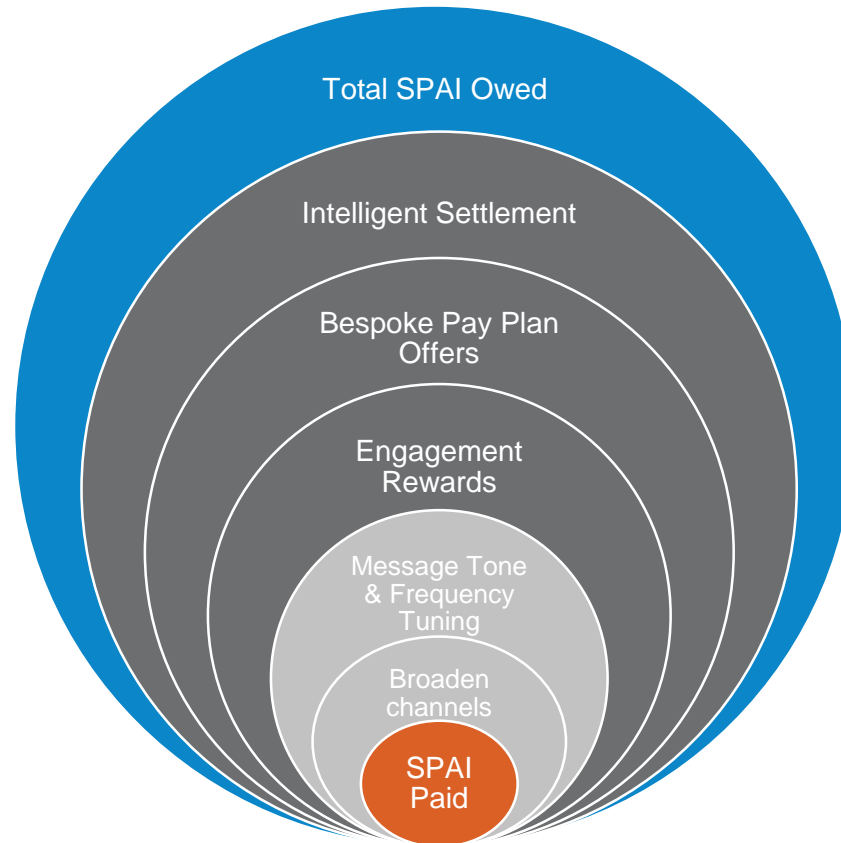
Poll

When a patient comes to your website, which of these does your website change based on patient's ability to pay?

Putting it All Together



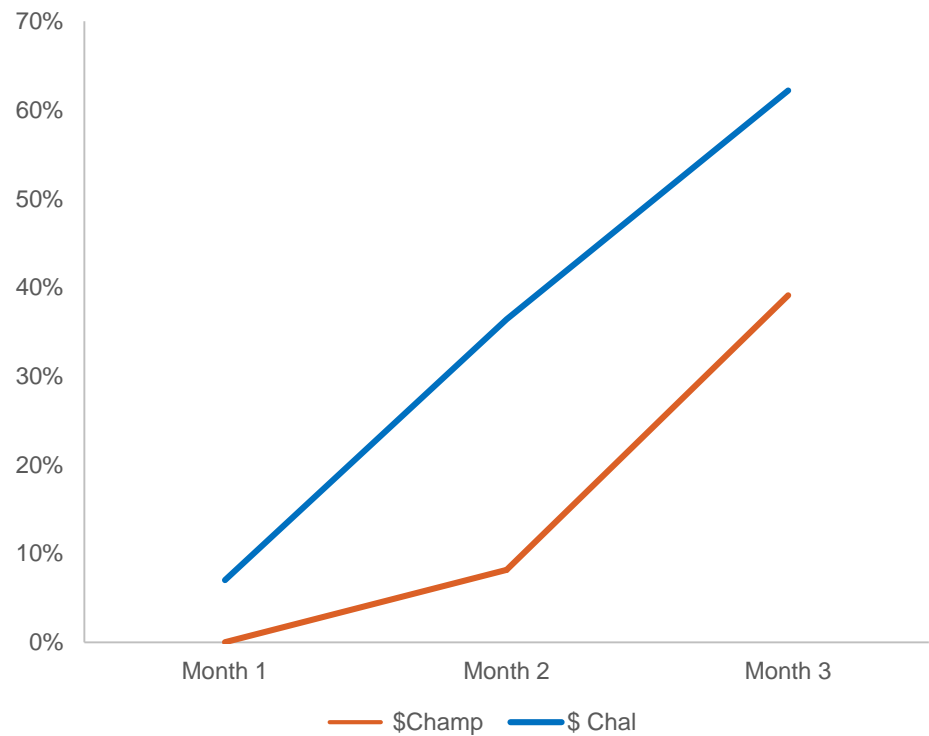
Deployment



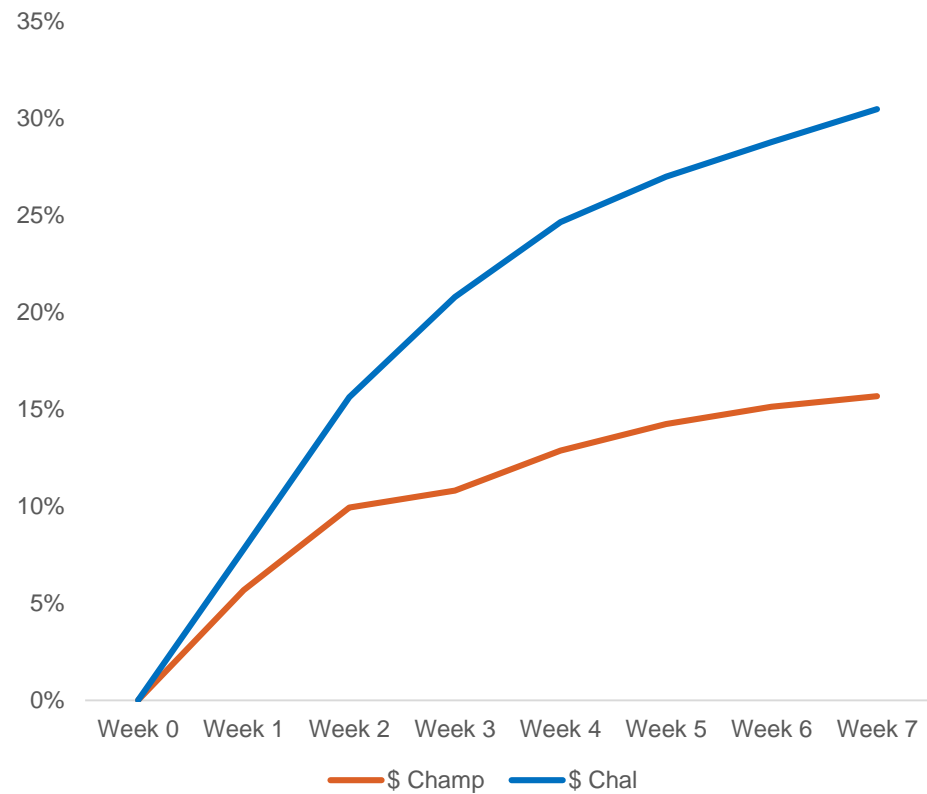
Results

Large Family Medicine Practice

Actual Day 1 to day 59 Collection Percentage
(static pool)

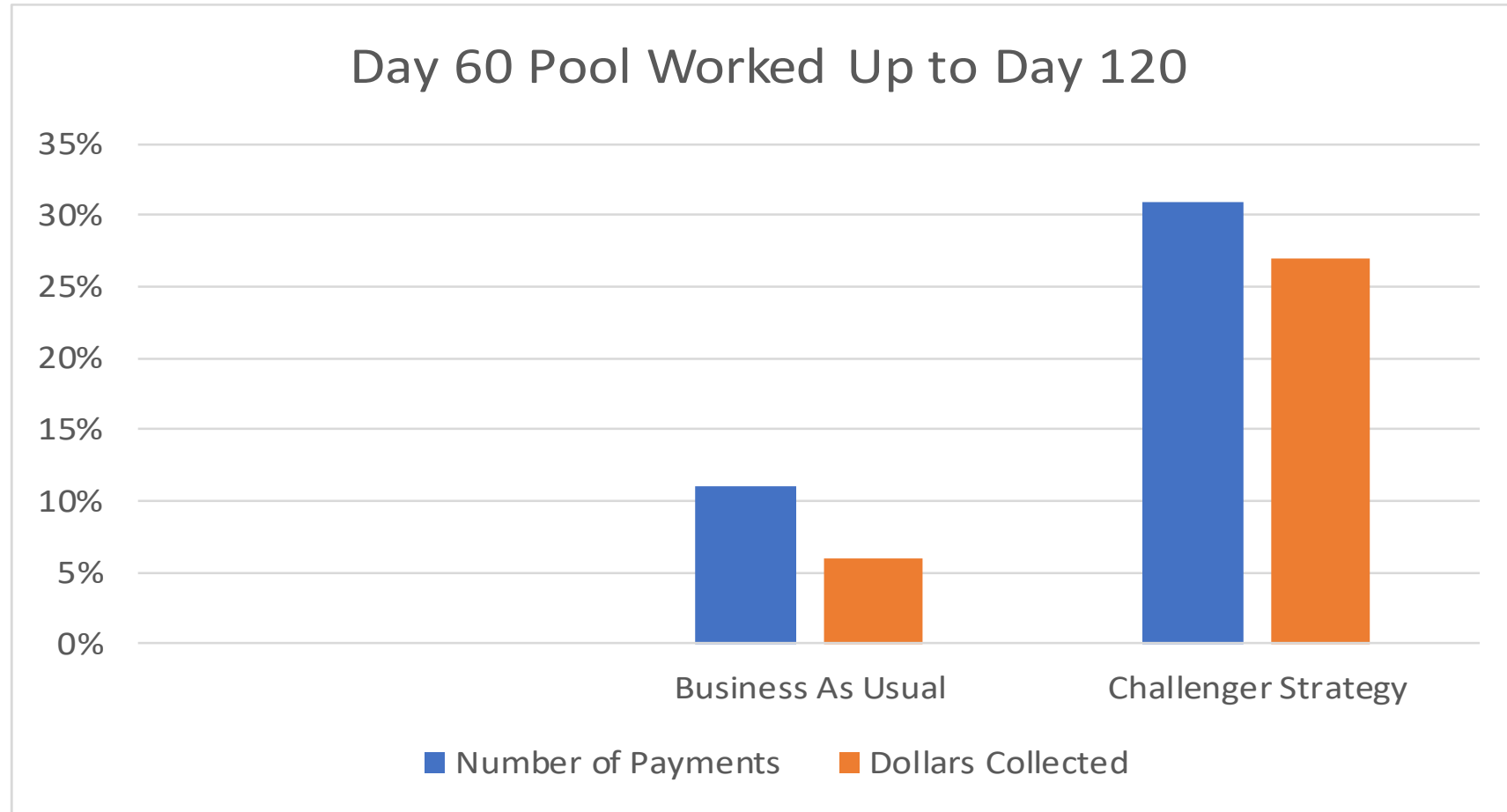


Actual 60+ Patient Balances Cum Lift Curve
(static pool)



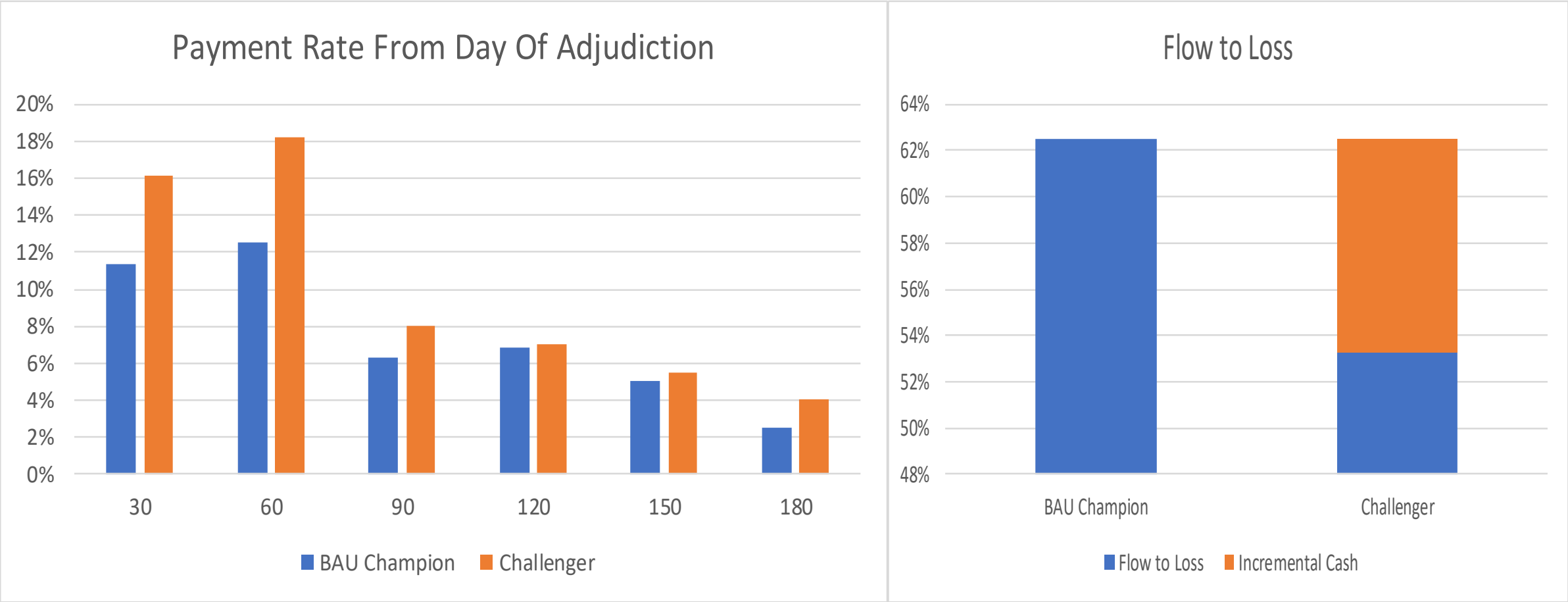
Results

Endocrinology Practice



Impact

Hospital System Projection



Patient Demands

ACI Worldwide

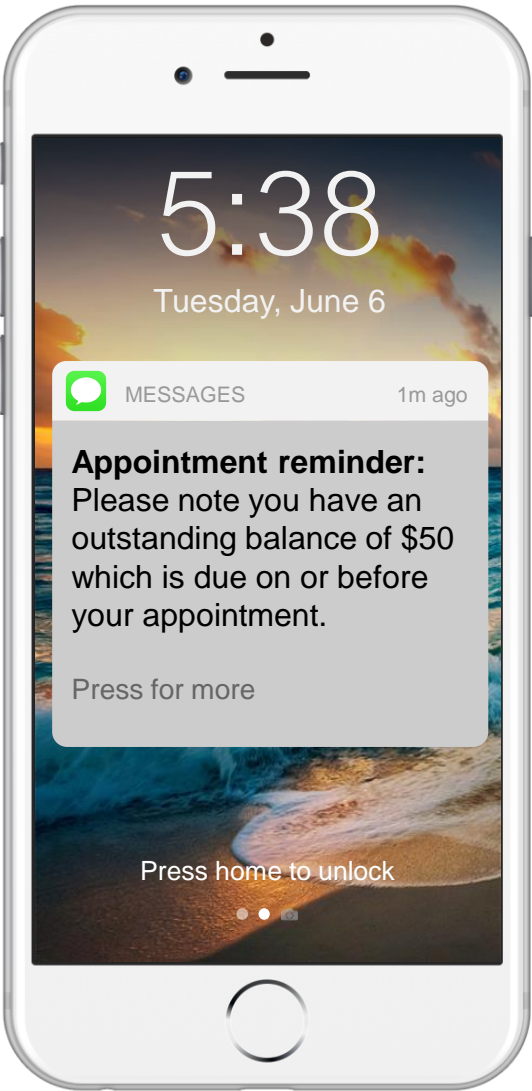
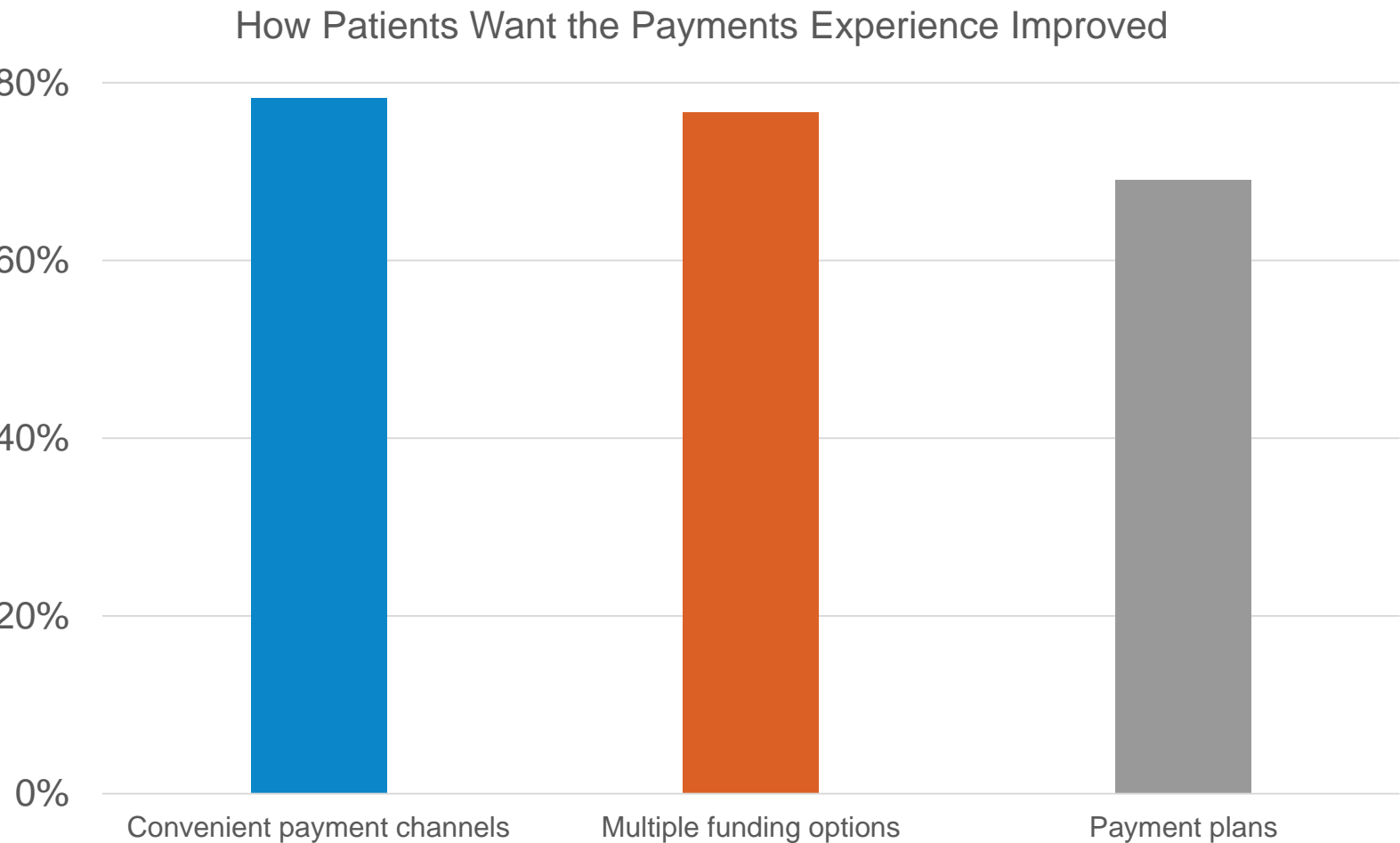
Patients Want Easier-to-Read Bills



88%

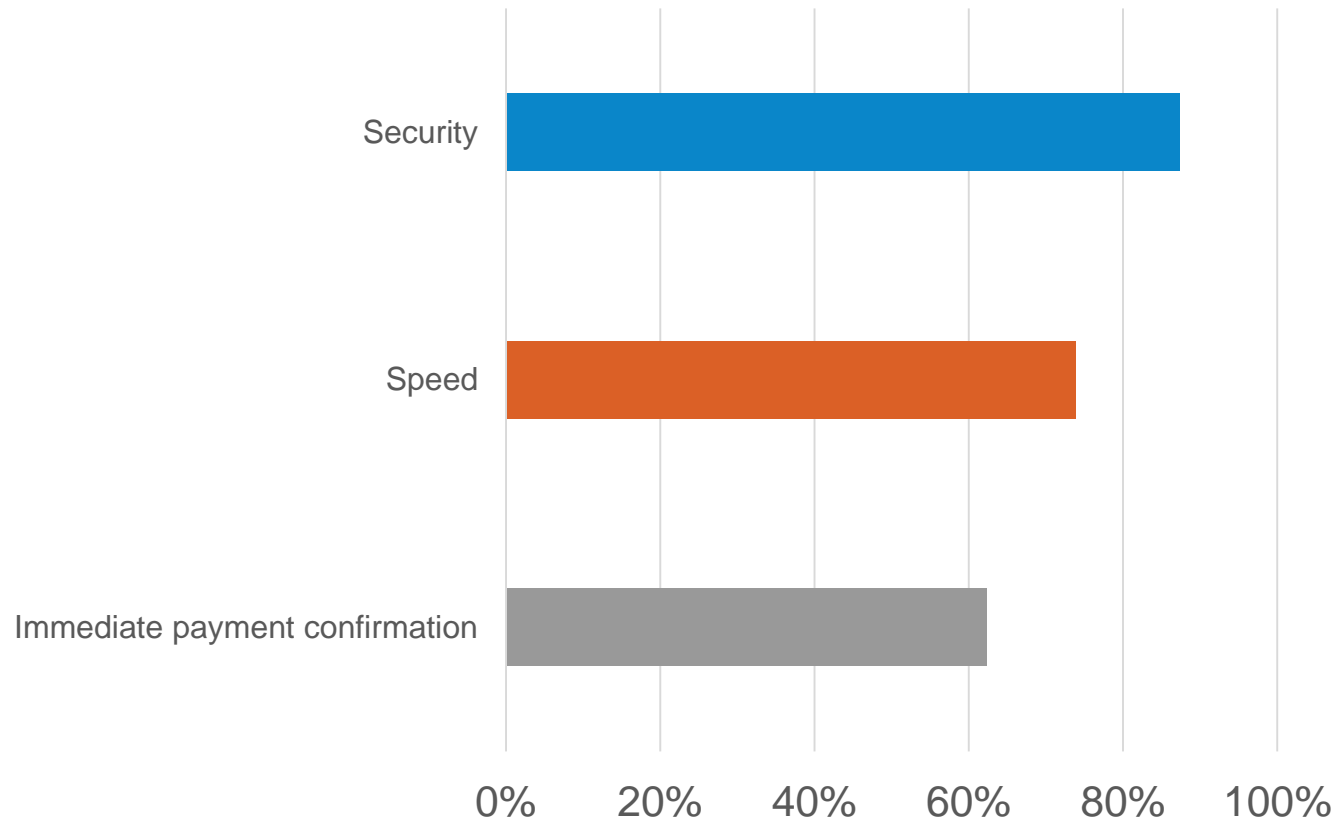
**of patients want
an easier to read healthcare bill.**

Options, Options, Options



Beyond Options, Patients Want Faster and Safer Payments

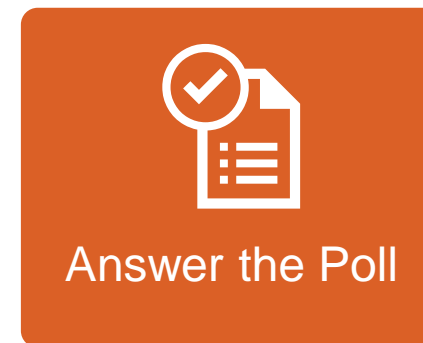
How Patients Want the Payments Experience Improved



How to Get Started

One Year	
Total revenue	\$500,000,000
Self pay after insurance (SPAI)	20%
Industry average net flow to loss	59.30%
ACI net flow to loss	30.40%
Incremental SPAI dollars collected	28,900,000
Gross revenue increase	\$27,800,700
Payback	25

- 1 Provide ROI to CFO
- 2 Easy technology integration
- 3 Start collecting more



Actual results may vary to projection, driven by local market conditions and the level of operating sophistication and efficiency of the client. The projections above assume a baseline of immature operating sophistication and efficiency. Incremental SPAI collected is net of paid POS co-pays.

Status quo is not an option

Questions?

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