

Is Your Organization Ready to Apply for Recognition as an Adopter of the PATIENT FINANCIAL COMMUNICATIONS BEST PRACTICES®?

Check the boxes for items that apply to your organization. If you can check most of the boxes on this list, your organization is well positioned to apply for and receive recognition as an Adopter of the Patient Financial Communications Best Practices®. If some of these items don't yet apply to your organization, you have identified areas for improving your approach. HFMA offers an online training program that can help. For more information, visit hfma.org/pfcprogram.

- 1. We have a written policy and procedures to govern patient access activities related to patient financial communications in the following situations and settings:
 - a. Emergency department
 - b. Unscheduled (walk-in) patients at the time of service
 - c. Advance of service
- 2. Our financial policies specify what to do in the case of patients who have a prior balance when they present for and/or schedule care.
- 3. We have a toll-free number that is widely publicized that patients can call to receive assistance with financial matters and concerns.
- 4. I agree with the following statements:
 - a. Compassion, patient advocacy, and education are a part of all patient communications at my organization.
 - b. We use standard language to guide staff on the most common types of patient financial communications.
 - c. Face-to-face communications are used appropriately to facilitate one-time resolution.
 - d. Availability of supportive financial assistance is always communicated to the patient and the community.
 - e. We initiate financial communication with patients.
 - f. We include the patient's perspective in the development of the standard language used for patient financial communications.
 - g. We routinely verify patient information and the patient's preferred methods for future communication.
 - h. We respect patient privacy in all financial communications.
 - i. All of our patient financial communications focus on steps toward amicable resolution of financial obligations.

(continued)

- 5. We have technology solutions in place to support the following functions:
 - a. Insurance verification eligibility
 - b. Estimation to calculate the patient's responsibility for services
 - c. Identification of prior balances due
- 6. We have a process in place to assess our performance in areas related to patient financial communications.
- 7. We have a training program in place for staff in the Emergency Department, Patient Access, Financial Counseling, and Customer Service who deal with patient financial communications.
- 8. We can provide recent year-end data on the following performance metrics:
 - a. Net days in A/R
 - b. POS cash as a percentage of total patient cash
 - c. Insurance verified encounters as a percentage of total encounters
 - d. Pre-registered encounters as a percentage of scheduled encounters
- 9. Our CFO or Vice President of Revenue Cycle will attest to the accuracy of the information we submit in our application.

