

Patient Collection Scripts and Tips

Scripts for Requesting Payment or Informing about Payment Responsibilities

Prior to Day of Service

- When a new patient with insurance makes an appointment
 - *“Payment is due at the time of service, unless you bring your current insurance card, in which case only the co-payment and deductible amount will be due.”*
- When a new patient without insurance makes an appointment
 - *“Payment in full is due at the time of service”*
- When a patient with a previous balance makes an appointment
 - *“Both your payment (or co-pay) for this visit and your prior balance of \$75 will be due at the time of service.”*
- Informing patient of expected financial responsibility ahead of time
 - *“Mr. Brown, I contacted your insurance company and according to your insurance the procedure the doctor has ordered for you is a benefit under your plan.....(pause)....I also want to let you know that according to your insurance you have a co-pay of 30% after deductible. I calculated what you would have to pay. You will be responsible for approximately \$120. We do require payment on the day of the appointment. We accept Mastercard, Visa, Checks and Cash. ...Do you have any questions?”*

On Day of Service at Registration or Check-out

- Apply discount if applicable but always, always let the patient know what the total charges were, what the discount is, and what their portion is....Start off by saying:
 - *“The total charge is \$___ but after I apply your discount of \$___ your portion is \$___.”*
 - *“Mrs. Lopez, the charges for today’s visit is \$120. After I apply your discount of \$80 your payment is \$40. Would you like to pay with cash, write a check or with a credit card?”*

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- Persuade to pay any past due balances in addition to today's fees
 - *"Mr. Perez, the charge for today was \$10 due to your copay responsibility according to your insurance. You also have a previous balance of \$320, so the amount due to today is \$330. Will you be paying by cash, check or credit card?"*
- If patient cannot pay in full, obtain date they will return to pay for today's visit in full. Check your policy on how much time can give. It is important to develop urgency...explain that the health center needs to be paid so it can continue to provide care.
 - *"Ms. Jones, if you are not able to pay today when will you come back within the next week to take care of this payment? Your payment is very important to help us keep our services going...."*
 - *"Ms. Jones, what day of next week should I schedule a call from our billers to obtain your payment over the phone? Your payment is very important to help us keep our services going...."*

After day of service

- If calling to collect on an unpaid balance, say who you are and why you are calling:
 - *"This is _____ and I'm calling about your balance of \$1000 which has been outstanding over 75 days."*
 - *"Mr. Rivera, your account has been given to me for special attention, I'm here to help in any way I can."*
- When working with patient on a payment plan, establish exact amounts and time frame for payments to be made, establish how payments will be made, and confirm agreement. Follow up with phone calls immediately if payment not received on time:
 - *"So let's review, you will pay \$50 every month for 6 months, to pay your \$300 amount due. I'm very pleased we were able to work out a payment plan that will get your account up to date. I will expect your first payment of \$50 on January 1st, and then every first of the month through June 1st."*
- On payment plans, follow up with a phone call immediately if payment not received on time:
 - *"I'm calling about the check you said you would mail by January 1st. I see there have been no payments posted to your account and I wanted to be sure it wasn't lost or posted to the wrong account. When did you mail the check?"*

Scripts for Handling Patients' Negative Responses to Payment Requests

- Patient: "I've never had to pay at the time of service before. Can't you bill me later?"

Responses:

- *"Many patients like taking care of their balances up front so they don't have to worry about it later. That's why we're giving you the opportunity to pay now. Would you like to pay by cash, check or credit card?"*
- *"Paying now helps The Health Center avoid further billing cost. We're trying to do all we can do to control health care costs for our patients, and to make sure The Health Center is here if you need further care. Now, how would you like to take care of your balance today?"*

- Patient: "I didn't bring my checkbook."

Responses:

- *"Payment is due at the time of service. We accept cash or credit cards."*
- *"Payment is due at the time of service. Would you like to call home to get your credit card number, if you didn't bring it?"*
- *"Payment is due at the time of service. You can call us when you get home to give us your credit card number or you can come back later today with your payment."*
- *"Payment is due at the time of service. So you don't have to worry about your checkbook in the future, I can swipe your credit card today and pre-authorize any future payments."*

- Patient: "My ex-husband pays for all medical bills"

Responses:

- *"No problem, I'll give you receipts showing you've paid and you can send it to your ex so he can repay you."*
- *"If you put this on your credit card today, you can send the credit card bill to your ex to pay."*

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- Patient: “I can’t pay in full” or “I don’t have the money.”

Response:

- *“You may not know, but we have already applied the discount to your charges and payment is expected at time of service.”*
- *“You can pay half today, and then come in and pay the remainder before statements go out on (date).”*

Scripts for Handling Patients’ Negative Responses at Point of Collection

- Patient: “The check is in the mail”

Response:

- *“Thank you for mailing your check. What day did you mail it? Where? Amount?”*

- Patient: “I don’t pay the bills. Talk to my wife...”

Responses:

- *“Mr. Jackson, you are our patient. That is why I’m calling you regarding the account...”*
- *“Mr. Jackson, you are our patient, however, let’s schedule a time I can speak with both of you...”*

- Patient: “I can’t pay it all now...”

Response:

- *“The balance has already been extended for over 3 months. Let’s establish a payment plan than can bring you current within a 6 month timeframe....”*

- Patient: “I have insurance. They pay for everything.”

Response:

- *“According to your insurance, when you come in for a medical visit you have what’s called a co-payment which is due at the time of service. Your co-payment is \$25. This is what you have to pay today. The insurance will then take care of*

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the rest of your bill for today's visit which the estimate shows may be around \$160. I would be happy to help you call your insurance to clarify."

- *"Here is a document that shows that the insurance company already took care of a portion of your bill (\$120). The rest of your bill, \$45 is what you must pay. Would you like to call your insurance company to clarify?"*

Tips for Communicating about Payment

- When registering or checking-out patients have a welcoming attitude, check your body language and make eye contact because, remember, this is your best chance of collecting payment.
- Always WAIT for answer after you've asked how payment will be made...don't say anything but keep eye contact with the patient.
- When informing patients of financial responsibility, whether ahead of service or after the service, be positive and factual with informative tone
- Make sure to deal with payment collection before giving follow-up appointments at check-out.
 - Always focus developing urgency...explain that the health center needs to be paid so it can continue to provide care.
- When asking for payment, make it positive and a commitment. Use "will" instead of "can" –
 - *"Will you mail a check today?"*
 - *"Can you mail a check today?"* is not a real promise.
- Send a reminder (card, letter) of agreement for payment arrangement.
- For unpaid balance collection letters, make sure they are:
 - Short and focused
 - Don't give the patient excuses or alternatives
 - Don't use judgmental or accusatory tone
 - Command the patient to take action by a specific date
 - As account ages, letter becomes more assertive

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- Patient Calls are more effective than mailing statements
 - Statements often placed at the bottom of the pile - payment returned only 5 – 15 percent of the time
 - Calls get a better return
 - Work accounts in dollar amount order, not alphabetical - work large accounts first
 - All accounts, no matter how small, are important
- When making an unpaid balance collection call, first make sure you are talking with the patient who owes the money. In your communication:
 - Be professional - polite, courteous, business-like
 - Be positive - emphasize how you can help
 - Keep calm and cheerful - never raise your voice even if they do, don't allow yourself to be affected
 - Listen - maybe they need to vent, let it happen
 - Don't threaten or make false accusations
 - Ask for full payment - once you've listened, return to your goal
- If patient says that he/she cannot pay, you may need to negotiate.
 - Always start higher than you expect
 - Establish exact amounts and time frame for payments to be made
 - Don't accept "as soon as I can"