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OCT 12 MORE ON BILLING AND COLLECTIONS (/RESOURCE-TOPIC/BILLING-AND-COLLECTIONS)

Mobile payment platforms pick up in healthcare as patients crave more accessible billing

Patients are beginning to expect the same level of convenience in paying their medical bills as they do for most of their other bills,.

Chuck Green (/news/author/2621) (/news/author/2621)



Mobile payments solutions are gaining traction in the healthcare industry, according to experts, as the smartphone revolution takes root in American healthcare.

Patients are beginning to expect the same level of convenience in paying their medical bills as they do for most of their other bills, said Laurie Hurwitz, executive director of revenue cycle at Gundersen Health System. Mobile

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payments allow patients to self manage their balances either by paying in full or setting up and managing payment plans. That also pays off for health systems, she said, by enabling a facility to cut the number of revenue cycle staff necessary to answer calls and shift those staff up in the cycle to offer things like more financial counseling, clearance and estimates.

Gundersen, based in La Crosse, Wisconsin, implemented its current solution in 2014. Patients had been able to pay online through the facility's patient portal, but that required them to have an account, which they had to use to log on, she said. Gundersen still offers that solution, in addition to the ability to pay online without creating or logging into an account, said Hurwitz.

[Also: Mobile payment apps offer opportunities and risks for doctors (/news/mobile-payment-apps-offer-opportunities-and-risks-doctors)]

It's all about getting providers paid more and making the payment process simple, convenient and secure for the patient, said Jeff Lin, senior vice president at InstaMed. "With evolving technology and consumer demographics, providers need to engage their patients for payment through every available payment channel." While traditional patient payments still may involve cash, check and card, mobile payment transaction volumes and payment amounts are quickly increasing, he said. "No health care provider wants to make it harder for their consumer to pay their increasing patient responsibility portion of their bill."

InstaMed sees strong adoption year over year of mobile payments. In 2011, mobile payments made up 2 percent of consumer payments. In 2015, close to 20 percent of all consumer payments were coming from a mobile device. This increase in just four years shows that mobile payments are here to stay and the growth in the next four years will be even more dramatic."

Adoption of these technologies serves to improve two important areas: customer service and revenue cycle, said Harry Greenspun, director of Deloitte's Center for Health Solutions. "On the consumer side, data from our Survey of Consumers shows that consumers often judge the quality of the care they receive by the service experience rather than the outcome," he said. As mobile payment becomes more common in other industries, consumers' expectations of the services health care should offer increase.

[Register: Revenue Cycle Solutions Summit (http://www.revenuecyclesolutionssummit.com/)]

At the same time, the rise of high-deductible plans and greater out-of-pocket (/directory/out-pocket-payments) responsibilities for patients means convenient point-of-service payment helps avoid collection issues and bad debt down the road, said Greenspun. This has become increasingly important with new subscribers on public exchanges who may have limited experience with the complexities of copays and other charges, or may be more inclined to pay cash.

So, which health systems are using mobile payment solutions? Lin believes it's not about the size of the system, but more about the availability of the technology that can engage the consumer in a simple, convenient, and secure way. "We see general smartphone and tablet adoption widespread nationwide, across many consumer demographic segments. We also see health systems and groups of all sizes interested in serving their consumers in a consumer friendly manner."

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Although quality-reporting programs such as meaningful use provide incentives to help providers implement and use electronic health records (EHRs) to collect and report on clinical data, practices often need help deciding what data to collect, which measures to report ... As rapidly as mobile payments are hitting their stride, as with any system or app, success often hinges on the degree to which it's integrated into other systems, said Greenspun. "If a system can help me check my bill, confirm my copay, or compare costs, it can be very useful. If it only collects money, it may add unnecessary complexity and cost compared to pulling out a wallet and handing over a credit card or some bills."

Lin pointed out the downside of deploying mobile as another payment channel without a partner without a proven track record and the proper security and compliance protocols in place. "How do you manage the various payment channels and ensure that all your environments from desktop, online, and mobile are secure? How do you manage posting, reconciliation, refunds and other operational processes with payments coming in through so many channels? It's important to consider a single platform solution that can minimize data handoff and your security risks and while enabling streamlined processes that help to achieve your business objectives while engaging with your patients."

However, Hurwitz only sees a bright side to accepting mobile payment solutions.

"For patients used to paying their bills online, this is a nice option that's as easy -or easier -- to use than any other online payment portal they currently use."

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OCT 21 MORE ON HOSPITAL/PHYSICIAN RELATIONS (/RESOURCE-TOPIC/HOSPITAL-PHYSICIAN-RELATIONS)

Hospital-physician integration driving up medical prices, JAMA study says

he increase in outpatient spending was driven almost entirely by price increases.

Susan Morse (/news/author/82001), Associate (/news/author/82001)

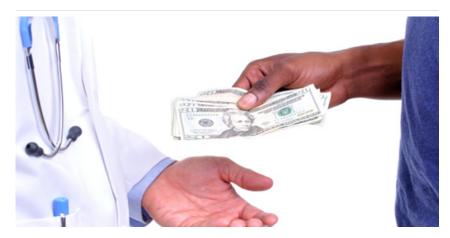
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Editor





A new study in the Journal of the American Medical Association (/directory/american-medical-association) has found higher healthcare prices for outpatient care linked to the financial integration between physicians and hospitals.

Financial integration between physicians and hospitals helps providers meet the challenges of new payment models and may enhances their bargaining power, according to JAMA Internal Medicine, a publication of JAMA.

The effect of greater bargaining power is the potential for higher prices and spending in commercial healthcare markets, the authors said in the Oct. 19 report.

[Also: *Clinics, tech, physician practices acquisitions to outpace hospital deals, Accenture report says (/news/clinics-tech-physician-practices-acquisitions-outpace-hospital-deals-accenture-report-says)*]

The authors studied the relationship between physician-hospital integration and changes in spending, from 2008 to 2012, using data from the Truven Health MarketScan Commercial Database.

The study population included over 7 million non-elderly consumers in 240 metro areas who were enrolled in preferred-provider organizations or point-of-service plans.

The study found that over the four years, physician-hospital integration increased by a mean of 3.3 percentage points, with considerable variation across the metro areas.

During this time, there was a mean increase of \$75 per enrollee in annual outpatient spending, and a 3.1 percent increase in outpatient spending in 2012, according to the study. The increase in outpatient spending was driven almost entirely by price increases because associated changes in utilization were minimal, according to the study.

Changes in physician-hospital integration were not associated with significant changes in inpatient spending, the authors said.

Twitter: @SusanJMorse (http://www.twitter.com/susanjmorse)

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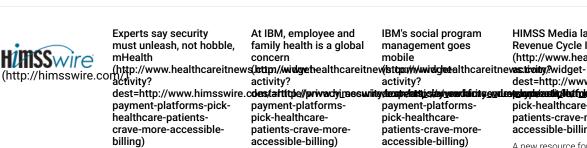
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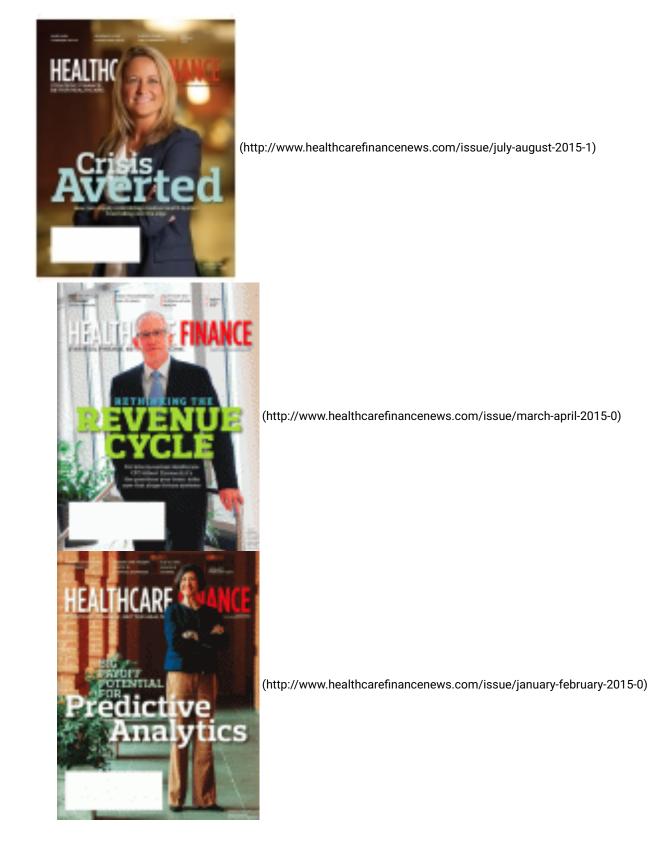
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