

How can you develop a best-in-class front-end revenue cycle?

Hover over the icons to read more

Assess yourself

Take action now

THE MEASURE:

Point of service collection rate*

Why it matters:

The Healthcare Financial Management Association (HFMA) defines patient point-of-service payments as patient cash (self-pay cash) collected prior to or at the time of service and up to seven days after discharge. As patients take on more financial accountability for their health care, hospitals need to assess if their staff is effectively collecting patient payments before overdue bills turn into hospital bad debt.

*Divide the total value of patient point-of-service payments by the total self-pay cash collected.

- Verify eligibility at the right time –
 Leverage batch inquiries for groups of
 patients prior to appointment and recheck
 eligibility at registration.
- Leverage real-time medical eligibility verification – Retrieve eligibility status and benefit information in seconds.
- Train staff to process prior authorizations with the right procedures and codes, resulting in faster approvals.
- Calculate price estimates for patients —
 After you verify eligibility, use the information provided by the patient's insurance provider, as well as your contracted rates, to calculate a price estimate for your patients.

Optum offers solutions to address claim editing, management and claims integrity.



Contact us today to learn how we can help you overcome your front-end revenue cycle challenges.

