

The following presentation was presented during the
Indian Health Service

Patient Registration & Patient Benefits Coordination Training

July 12-15, 2022

If you have questions about this presentation you may contact the presenter(s) or you may send an email to ihbusinessoffice@ihs.gov

Please note: The aim of this presentation is to share and facilitate the sharing of helpful information, but please note that it may reflect presenters' opinions and not necessarily those of the Indian Health Service or the U.S. Department of Health and Human Services.



Patient Registration & Patient Benefit Coordinator -Basics-

Presented by, LaShawn Ruiz & Dustie Cummins

Introductions

Dustie Cummins, Patient Benefit Coordinator at the Crow Service Unit in the Billings Area.

LaShawn Ruiz, Supervisory Health System Specialist at the Phoenix Indian Medical Center in the Phoenix Area



Patient Registration Basics

What is registration and it's purpose

- ✓ It's a model for collecting patient demographic information
- ✓ Provides data to other various sources and helps allocate utilization of third party resources
 - Medicare, Medicaid, PRC, and private insurance.
- ✓ Registration benefits everyone



Creating Positive Patient Experience

- Friendly attitude
- Look up and smile
- Acknowledge they are there
- Ensure a timely interview
- Explain forms in a way they understand
- Offer help with honesty



Streamline Registration

- Revenue Operations Manual
 - Placement of registration
 - Written Procedures
 - Pre-visit planning
 - Utilize technology
 - Role Clarity
- 

A decorative graphic on the left side of the slide. It features a central vertical axis with a large dark blue diamond shape. Above and below this diamond are smaller dark blue triangles pointing towards the center. The background consists of horizontal bands of color: dark blue at the top and bottom, followed by red, gold, dark green, and a wide cyan band. The cyan band contains the dark blue diamond and triangles.

Registration Functions

- Eligibility for services
- Obtain required information and documents
- Prior Authorization
- Refer to Benefits Coordinator
- Kick off the revenue cycle

Other Duties Assigned

- Scanning registration documents into Vista
- Check In
- Schedule Appointments
- Ambassador/Advocate
- Collection of documents for aspects



COVID & Registration

- Contactless Registration
- New workflows for telemedicine
- Online registration and messaging systems
<https://www.ihs.gov/phoenix/healthcarefacilities/phoenix/pediatrics/>
- Technology learning curve as part of their healthcare experience

Self-Care

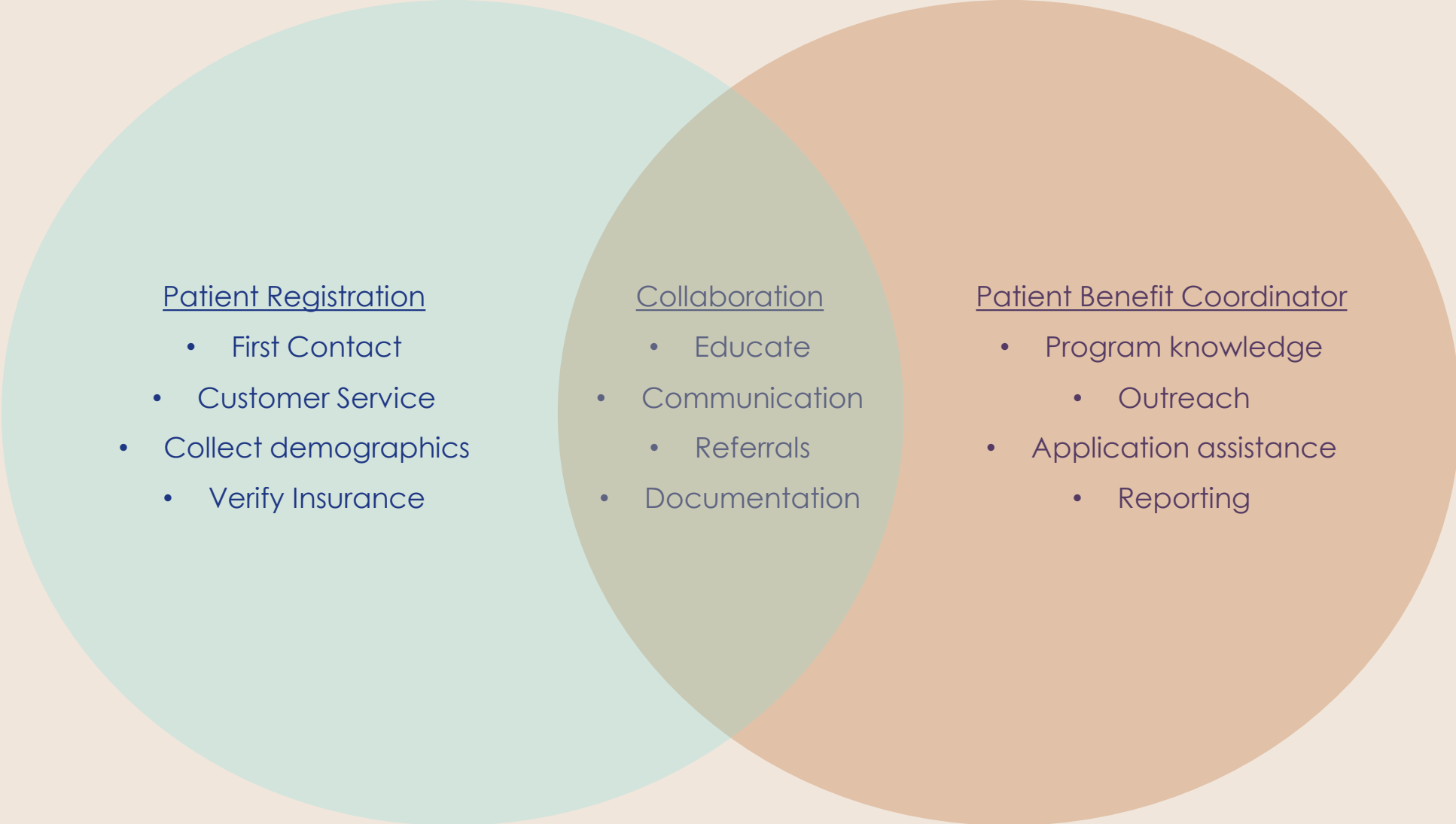
- Take a walk during break
- Take a moment to lotion your hands
- Unplug
- Stretch
- Read a good article
- Buy yourself some flowers
- Breathe





Patient Registration & Patient Benefit Coordinator Collaboration

PR & PBC Collaboration



Patient Registration

- First Contact
- Customer Service
- Collect demographics
- Verify Insurance

Collaboration

- Educate
- Communication
- Referrals
- Documentation

Patient Benefit Coordinator

- Program knowledge
 - Outreach
- Application assistance
 - Reporting

Patient Benefit Coordinator Basics



Patient Benefit Coordinator Basics

Main purpose of a PBC is to represent IHS and advocate on behalf of patients.

- The Benefit Coordinator has a key role in the revenue cycle; by identifying patients who are eligible for alternate resources, providing application assistance, that eventually results in generating revenue for the Service Unit.
 - Revenue stays in the facility to improve and create services, staffing, and frees up PRC funds to serve more community members
 - Although IHS is not a for-profit entity – we should maintain a money making outlook – while simultaneously having each patient's best interest in mind

PBC's do more than help generate revenue

- What PBCs do is in the Human Service realm – connect community members to services like Nutrition and Energy Assistance, make referrals to outside agencies, or to services like Behavioral Health
- This helps communities become stronger and healthier.

PBC Qualities

- People-oriented qualities and skills:
 - Compassion
 - Empathy
 - Trustworthy
 - Exceptional customer service
 - Public speaking
- Other:
 - Organized and have an attention to detail
 - Good time management
 - Self-motivated and proactive
 - Computer proficiency
 - Familiarity and understanding of health insurance
 - Experience and knowledge of third-party payers, statutes and regulations that impact eligibility for health insurance coverage



PBC Duties

- Coordinate with patient registration to identify patients with no alternate resources.
- Understand and recognize what programs each patient/family would be eligible for based on their unique circumstances.
- Stay current on programs' regulations and policies.
- Educate patients on all programs and potential benefits of each option.
- Provide information, referrals and/or assistance for other non-alternate resource programs, including cash assistance, Supplemental Nutrition Assistance Program, Social Security Administration benefits, VA benefits, and other local and tribal benefits.
- Respond to referrals from patient registration, PRC, and other departments/committees; make appointments with patients without alternate resources.
- Educate Patient Registration, PRC, and other staff on updates to programs.
- Provide outreach, education, and assistance regarding alternate resource programs to patients and community members.



PBC Duties

- Partner with local and tribal programs to provide outreach and education.
- Application assistance to patients if they decide to enroll in an alternate resource; educate and give information on documents needed and if necessary assist in gathering them.
- Assist patients with eligibility renewal.
- Timely alternate resource application follow up.
- Document activity in RPMS.
- Adhere to PBC processes; including documentation in RPMS, timely review of application status, resubmission of applications, local documentation requirements, etc.
- When an application is approved, notify third party billing (Billers and POS) and PRC with the required information and effective date of coverage.
- Prepare reports for supervisor and/or administration

PBCs & COVID

- Telework and technology
 - The PHE has definitely contributed to PBCs being more reliant on technology
 - Being creative about how to serve our community



- Communication
 - Social Media Presence
 - Phone

- Shift regarding Insurance
 - I have noticed a shift about the value people have put on health and having insurance – less hesitant to sign up for alternate resources, unless cost involved



Q&A

Contact Information:

LaShawn Ruiz	lashawn.ruiz@ihs.gov	602-581-6283
Dustie Cummins	dustie.cummins@ihs.gov	406-623-0575