

Reporting Patient Balance by Provider Location

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Executive Summary

In health care, it's important to capture data accurately to make informed business and operational decisions. With the increase of patient balances in health care, having the necessary reports to use as tool to assist analysts in their work is essential. For the scope of this project, the reports I've created consists of utilizing information from both patients and providers. The method is by using the details from both tables which allows us to find outstanding balances by patient and by provider location. This information can then be used to research patient socioeconomic factors, collection efforts, front office operations for each provider and location. In conclusion, by using the report to conduct root cause analysis, we can use the findings to provide training opportunities to applicable staff members and provide recommendations to healthcare operations to sustain organizational financial health.

1.0 Introduction

The purpose of the data report allows analysts to begin work conducting a root cause analysis for outstanding balances by provider and location. An analyst may determine that for a particular provider patients have higher outstanding balances for various reasons. Those reasons can include high deductibles, copays, and coinsurance. In some instances, an analyst may find that provider is out-of-network and the organization may want to discuss payer contract negotiations. Another reason may be poor training for frontline office staff and more training on insurance eligibility verification is necessary along with possible scripting developed to help with payment collection efforts. This business model assumes one provider can see many patients.

2.0 Methodology

The methodology used for these reports uses two tables from a Hospital Clinics Database. The

physician table includes unique attributes for each clinician, including their location. The patient table includes unique attributes, as well as patient balance and providerID.

Tables

Hospital Clinics Database

Table:

Physician (PhysicianID, NPI, PhyLastName, PhyFirstName, PhyPhone, Office)

AK NPI

SK PhyLastName, PhyFirstName

Table:

Patient (PatientID, PaLastName, PaFirstName, SSN, Balance, PhysicianID)

AK SSN

SK PaLastName, PaFirstName

FK PhysicianID → Patient

Relationship: This business model assumes a physician can have many patients, but each patient has one provider. This is a one-to-many relationship.

Forms:

Patient Form

The purpose of the Patient Form allows us to choose patient demographic fields to display. The patient form here illustrates individual patients by displaying patient information along with their account balance and unique PatientID to help analyst work individual patient accounts greater than \$5.00. This organization has a policy that defines small balance write-offs less than \$5.00.

Physician Form

The purpose of the Physician Form is to display unique provider information such as NPI, provider name, phone number, and location of provider office. By pulling providers by their

location, this information can assist analysts in their review process by number of providers at a certain location and patient balances tied to that provider and location.

Queries:

Balances >\$5

The balance query allows analysts to see all patient balances greater than \$5.00. Since this organization has policy to write-off balances less than \$5.00 analysts can focus on those that the organization needs to collect and troubleshoot why payments were not collected at the time of service.

SQL

```
SELECT PaLastName, PaFirstName, Balance
```

```
FROM Patient
```

```
WHERE balance >$5;
```

Table Result

Balance >\$5		
PaLastName	PaFirstName	Balance
Gonzalez	Joseph	\$25.00
Tyler	Steven	\$15.00
Jackson	Kimberly	\$50.00
Dugan	Amy	\$15.00
Taylor	Lucy	\$100.00
George	Tamara	\$30.00
Gray	Henry	\$75.00

Location & Patient Balance>\$5

This query helps identify provider, provider location and patient balances greater than \$5.00.

This is helpful for troubleshooting balance by a provider's location for reasons previously mentioned.

SQL

```
SELECT Physician.PhysicianID, Physician.NPI, Physician.Office, Patient.PaLastName,  
Patient.PaFirstName, Patient.Balance  
FROM Physician, Patient  
WHERE (((Physician.PhysicianID)=[Patient].[PhysicianID]) AND ((Patient.Balance)>5));
```

Location & Patient Balance>\$5					
PhysicianID	NPI	Office	PaLastName	PaFirstName	Balance
A1B1	1234567891	Main	Gonzalez	Joseph	\$25.00
A1B1	1234567891	Main	Tyler	Steven	\$15.00
A2B2	1237567441	South	Jackson	Kimberly	\$50.00
A4B4	1684215792	West	Taylor	Lucy	\$100.00
A4B4	1684215792	West	George	Tamara	\$30.00
A2B2	1237567441	South	Gray	Henry	\$75.00

3.0 Results

Report: Balances >\$5

This report uses the balances>\$5 query.

Patient Balances Greater Than \$5.00

LastName	FirstName	Balance
Gonzalez	Joseph	\$25.00
Tyler	Steven	\$15.00
Jackson	Kimberly	\$50.00
Taylor	Lucy	\$100.00
George	Tamara	\$30.00
Gray	Henry	\$75.00

Report: Location & Patient Balance>\$5

This report uses Location & Patient Balance>\$5 query.

Physician Location with Patient Balance>\$5					
PhysicianID	NPI	Office	PaLastName	PaFirstName	Balance
A1B1	1234567891	Main	Tyler Gonzalez	Steven Joseph	\$15.00 \$25.00
A2B2	1237567441	South	Gray Jackson	Henry Kimberly	\$75.00 \$50.00
A4B4	1684215792	West	George Taylor	Tamara Lucy	\$30.00 \$100.00

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4.0 Conclusions and Recommendations

Typical office visit copays can range from \$10-\$50. Two items on the report seem like an outlier worth investigating. Patient Henry Gray has a \$75.00 balance which seems high. Also, patient Lucy Taylor seen at the West clinic has a high balance. Although Main has balances, there may be some best practices to share. Another idea is to run a query for patients with zero balances for recent dates of service. We would need to add an attribute for patient DOS. I would also suggest adding the patient's insurance as an attribute to see if there are any patterns between certain payers.