



Humanizing Healthcare Coverage in the Digital Age

Leveraging Patient
Advocate Experts to
Drive Revenue



Let me put this into context for you...

Putting people and relationships first for 32 years...



Serving rural communities, patients, healthcare facilities and school districts since 1989

ClaimAid

- Eligibility services
- Early-out
- Claims resolution
- School-based Medicaid billing



**Patients need coverage...
and so do their families**



Uninsured and underinsured patients need coverage and often find it in Medicaid enrollment

31 million

Americans uninsured in 2020
– policyadvice.net

20.5 million

jobs lost during the pandemic
– thebalance.com

9.3 million / 13.1%

Medicaid/CHIP enrollment
increase during the pandemic
– KFF.org

6%

of working age adults lost
employer coverage due to
pandemic related job loss

35% x 2

35% used up all or most of their
savings

35% took on credit card debt

23% / 27%

23% delayed education or career
plans

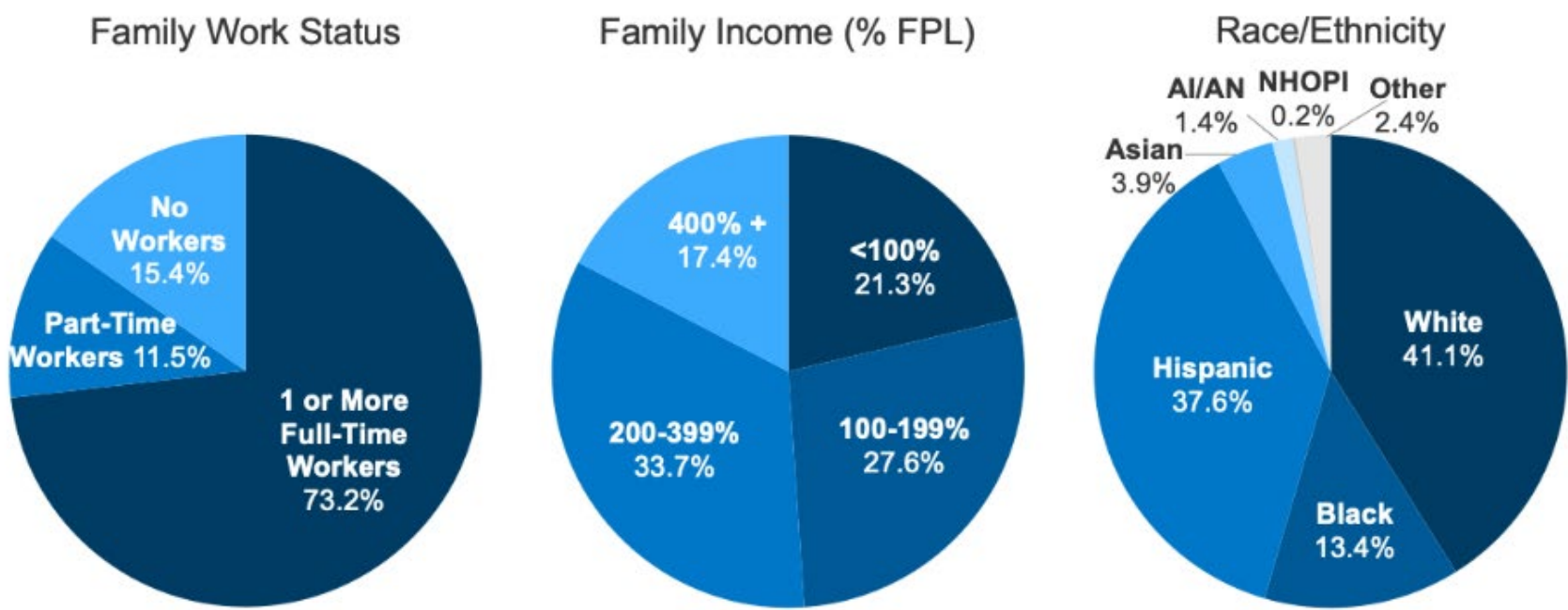
27% unable to pay for basic
necessities



Lack of insurance is an ongoing issue

Figure 4

Characteristics of the Nonelderly Uninsured, 2019



NOTE: Includes nonelderly individuals ages 0 to 64. AI/AN refers to American Indian/Alaska Native. NHOPi refers to Native Hawaiians and Other Pacific Islanders. Hispanic people may be of any race but are categorized as Hispanic; other groups are all non-Hispanic. The 2019 Census Bureau poverty threshold for a family of three was \$20,578.
SOURCE: KFF analysis of 2019 American Community Survey, 1-Year Estimates.





Hospitals need revenue...
rural hospitals more than ever



Hospital revenue is down while expenses are rising

Expenses Increase

25.4% for total hospital expenses
Per adjusted discharge

30% in labor expenses
Per adjusted discharge

20% in supplies year-over-year

36% for drug expenses year-over-year

Nearly half

of America's hospitals and health systems with negative operating margins by the end of 2020

\$53 to \$123 billion

Potential additional revenue loss projected in 2021



A total of 79 million Americans have medical debt problems
- policyadvice.net

Data source: aha.org

Unpaid out-of-pocket
expenses for uninsured

91%

Unpaid out-of-pocket
expenses for insured

56%

- ARxChange





Hospitals respond by looking to digital solutions for revenue cycle efficiencies

RPA, neural networks, machine learning, data analytics and AI – large systems implementing advanced, yet new technology

Focus on high-volume, rule-based, repetitive tasks - free employees from routine tasks

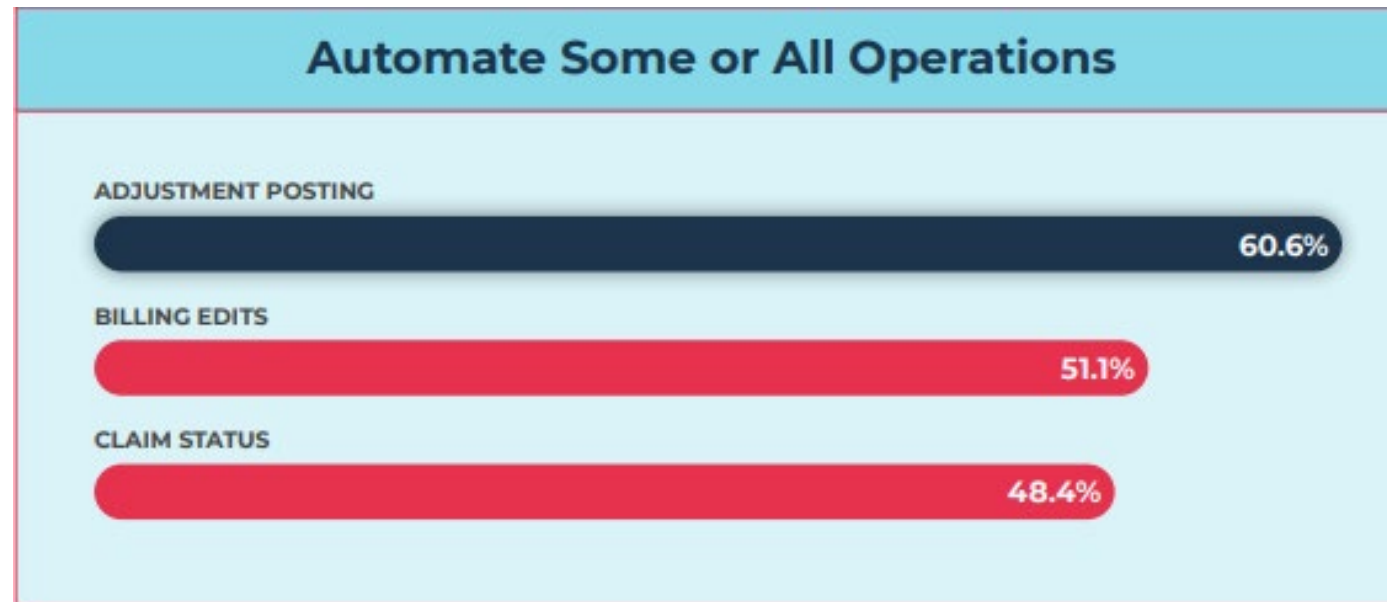
Automation to:

- Focus on higher-yield tasks
- Perform the right tasks at the right time
- **Avoid unnecessary manual touches**



Automation where it has the greatest impact

"In which of the following areas of revenue cycle operations do you automate some or all of the work?"



Data source: <https://www.hfma.org/gated/hfma-akasa-survey-pandemic-intensifies-need-for-revenue-cycle-automation.html>



83%

of consumers prefer
dealing with human beings
over digital channels to
solve customer services
issues and get advice

According to the Accenture Strategy Report -
“Digital Disconnect in Customer Engagement”

Who would you rather
have as your guide?





Humanize the process of finding coverage for a *better patient experience* and *increased hospital revenue*.

At the intersection of patient needs and limited hospital resources - it's the perfect place...

1

Listen to their stories...

Patient Advocates

Training, Knowledge, Compassion



Who are these Patient Advocates?

1

Available in person to meet the patient where they are

2

Compassionate and empathetic listeners who build relationships and garner trust

3

Adept at social work skills, those soft skills of having a servant's heart

4

Problem solvers who know how to break down barriers to find appropriate resources

5

Knowledgeable about all possibilities



Effective patient advocates require substantial critical expertise

Federal/State/Local Programs Knowledge

– dynamic rules, regulations and nuances

Network of resources and continuing education

- help each patient with a full set of resources to draw from by keeping current on the latest requirements

Licensures and Certifications

– all required state and federal where applicable with the addition of training to enhance skills

2

Set the best stage...

Enrollment Experience

Touchpoints, Expertise, Opportunities



What does the ideal enrollment process look like?

1

Pre-registration –
begin enrollment
before the
patient arrives

2

Primary Care
Clinics as part of
the health
system

3

Emergency
Departments
with business
and after hour
considerations

4

Inpatient units
meeting the
patient where
they are

5

Outpatient
appointments
following up on
communication
and outreach

3

Find solutions...

Insured Patient Population

Approvals, coverage, revenue





- **Capture all opportunities**
- **Fill gaps in coverage**
- **Coverage RETENTION!**

ADVOCATE IN ACTION!

Denise – 14 years and counting...

KNOWLEDGE is POWER

“Staying current on policy changes is important because changes are happening with very little lead time with some of the changes being retroactive. Much not readily available to consumers and the format of the information is not presented in a way that is easily understandable. At ClaimAid, we are able to dedicate staff to staying on top of policy changes at the state and national level and we make that information is always available to our advocates.”

PERSONAL RESOURCE

“Many consumers that I have worked with over the years have expressed relief that they have a “real live person” that they can talk to. Folks calling state agencies as well as many “application mills” are frustrated with facing phone auto-attendants every time they try to call to follow up on application status or ask questions about assistance or what programs they could qualify for. I frequently heard that they appreciated being able to call me, as an advocate, confident that I would answer my phone or call back quickly and speak with them directly about their specific case.”

FINANCIAL SUSTAINABILITY

“A free clinic affiliated with the hospital I worked for was providing many services to the patients free of charge, but the cost was becoming unsustainable. I was asked to spend one morning a week at that clinic and assist their patients with applying for any services they could qualify for. After a period of time, the number of patients that were being signed up for health coverage began to result in a reduction of the financial burden that the clinic was placing on the hospital and the free clinic could financially survive!”



ClaimAid
goes curbside!



GOING THE DISTANCE...

"Due to this crazy covid-19 the life of an advocate has changed in so many ways and we are all looking for the best way to adapt to the situation. Since we are not seeing patients in our work areas as of yet we have been trying to accommodate our patients/clients the best we can. In doing so I agreed to meet a client outside at their vehicle to get signatures and documentation necessary to file their application. Upon trying to return to the hospital to make copies, I discovered the door was locked and I was not able to get in and the closest entrance open was all the way in the back of the hospital at the employee entrance. I made my way around back in the 90-degree heat and entered the building then back to our work area to make the copies of the documents needed. In the meantime I called the patient and asked them to meet me around back so I could return the documents and avoid that walk again they were happy to drive around back since we was assisting them in getting the insurance they needed. And as my boss pointed out I got my steps in for the day.....not that I was trying to." – 'Marty', Patient Advocate

ACCOMMODATING A SCARED WIFE

"Just performed my first "curb side" service to a patient's wife whose husband is in a nursing home and we are working together to get him on Medicaid. She did not feel comfortable coming into the hospital and getting her temp taken and answering all the required questions. She is dealing with enough having her husband in the nursing home. Just trying to lighten her load a little and make things a little easier." – 'Cheryl', Patient Advocate



ADDED OPTIONS

"What I have found in the wake of Covid-19 is that we are having to find new ways of engaging and assisting our patients. One adjustment I have made is finding ways to meet patients while our hospital is operating on restricted access. My experience has been that many of our patients are a bit anxious about not having open access to our offices. Many of them are not adjusting well to doing business without face to face interaction. Our hospital is committed to the health and safety of all of its staff and patients so they are carefully screening all persons who enter the facilities. Although we understand the need for the new protocols, many of our patients are not aware of the changes and are frustrated when they are not allowed to take a direct path to certain areas in the hospital (us). To remedy our patients frustrations I have arranged for all patients who want face to face interaction to call me before entering the hospital so that I can meet them at the door! The patients love this and are at ease when I greet them upon entering the hospital. The patients, hospital security and registration staff all appreciate this small but kind gesture, and I am happy when I am able to assist our patients in getting me everything needed for the best possible outcome for health coverage!" - 'Brenda', Patient Advocate





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THANK YOU!