COMMUNITY BENEFIT

NAVIGATING FINANCIAL ASSISTANCE AT MERCY: COMPASSIONATE CARE FOR PATIENTS

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t Mercy, we are committed to delivering compassionate, high-quality care and understand that financial barriers should not prevent anyone from receiving the care they need. Accessing health care can be overwhelming, particularly for individuals and families facing economic difficulties. As part of our mission to bring the healing ministry of Jesus to life, we offer financial assistance programs to try to ensure equitable access to medical services for all.

While it's important that our mission is reflected in our financial policies, it is even more important that related practices demonstrate our mission in action to patients. With a commitment to living our mission through financial care, we have implemented ways to better link patients to financial programs, and the health care system has received recognition in recent years for this work.

Such measures are important to health. For example, our Patient Services team, who process assistance applications, has heard from people that financial assistance gives them peace of mind and willingness not to delay treatment due to financial concerns, but to receive care to treat their conditions. By helping patients manage medical costs, we ensure they are not denied care due to their financial circumstances, promoting a culture of dignity and respect for those who choose Mercy.

RECOGNITION FOR ETHICAL BILLING PRACTICES

Mercy's commitment to financial fairness has not gone unnoticed. In 2022, we were recognized by the Leapfrog Group and *Money* magazine for our ethical billing practices,¹ preventing medical errors and providing clear communication to patients. This recognition highlights our dedication to transparency and patient-centered care, values that extend to every aspect of our financial assistance program.

CHANGES TO THE SYSTEM

Traditionally, a patient or their loved ones could fill out forms seeking financial assistance. To try and ease this process, we've pared that back substantially. We now ask for the minimal information necessary for the determination of assistance, understanding that all patients may not have the vast amount of documentation we once required. Another important step at Mercy involves preand post-care screenings to identify patients with financial need, and to try and separate this process from their medical appointments, when possible.

COMPREHENSIVE APPLICATION PROCESS

Mercy's financial assistance process offers multiple ways for patients to apply:

- Presumptive screening: Mercy uses advanced data tools to proactively screen patients both during the scheduling conversation and after their service, prior to issuing a billing invoice. If these tools show that a patient falls below or meets 200% of the federal poverty guidelines, they may be automatically approved for financial assistance without needing to submit a formal application.
- **Traditional application:** Patients can also apply by submitting written forms, which are available online or at any of our health care facilities.
- **Verbal application:** Applications can be submitted verbally during registration or through

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customer service to accommodate patients who may find it difficult to complete written forms.

HOW FINANCIAL SCREENINGS WORK

Through the prescreening process, when a patient in need arrives at a medical office or hospital, the person checking them in for their appointment may see an electronic flag on the account that indicates if a patient has been determined eligible for presumptive financial assistance. They greet the patient and ask them to have a seat, but there's no financial conversation or request for payment. This practice is about honoring the dignity of the patient and not having that uncomfortable conversation with them about services that they cannot afford to pay. For other individuals who show as not being eligible for presumptive financial assistance, the person at the front desk will be prompted on screen to collect routine co-pays or coinsurance amounts.

Before we place anyone with a collection agency, we do a post-service presumptive screening to identify patients whose financial circumstances have changed in the 90 to 100 days since the service occurred. We screen the patient encounter again through our automated presumptive eligibility process before it's placed with a collection agency so that we have that opportunity to catch those individuals in the process as well. Mercy also has payment plan programs available.

CONNECTING PATIENTS TO MEDICAID

Financial care also includes working with patients to improve access to care by connecting them with Medicaid and other programs. We have financial specialists who screen emergency room patients for Medicaid eligibility, our financial assistance process and additional financial programs. They can guide that patient toward the appropriate aid or assistance track. Community health workers also do Medicaid screenings and financial assistance screenings to assist patients.

BILLING AND COLLECTION

With Mercy vendors and collection agencies, we require their leadership to take part in a condensed orientation to our organization, which includes formation. We want every Mercy patient to feel like they're talking to someone with the organization when communicating with related vendors and agencies.

UNDERSTANDING ELIGIBILITY

Income guidelines:

Mercy's financial assistance is primarily based on income relative to the Federal Poverty Guidelines (FPG). For example, full assistance is available for individuals and families earning up to and including 200% of the FPG, while those with incomes between 201% and 300% of the FPG may qualify for partial assistance. This tiered system ensures that financial help is available to those who need it most.

Medically necessary care:

Financial assistance is available for services deemed medically necessary. While essential health care services are covered, nonmedical services such as dental and vision care, unless specified, may not be included.

Insurance status:

Patients are encouraged to explore all available insurance options before applying for financial assistance. Mercy provides insurance eligibility screenings to help patients determine whether they qualify for Medicaid or other insurance programs.

We do not practice extraordinary collection actions at Mercy. A key component of any new acquisition is to quickly assess if any of these actions are happening so we can retrain staff to align with our practices. Failing to do so would be inconsistent with our mission and would be a reputational risk.

CULTURE OF ACCOUNTABILITY

We have a culture of accountability, and it starts at the top. Mercy's board, chief financial officer and other leadership are actively involved in the oversight of financial assistance policies. This culture of accountability is key to maintaining a patient-centered revenue cycle, where the focus is always on providing compassionate care. Mercy's leadership challenges us as an organization to constantly strive to identify improvements and avoid complacency in our processes. Our CFO asks us to make our revenue cycle different and to make it a patient attractor. We consider preserving patient

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dignity as the cornerstone of our assistance program. We also find ways to leverage automation to allow patients to spend less time on financial considerations related to their care.

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A phenomenal resource for those looking to enhance their financial assistance program is to consider their entire approach to patient billing through the widely available Healthcare Financial Management Association Patient Financial Communications Best Practices.² This is an excellent tool for assessing present practices against industry-leading practices and then developing a road map to make necessary and desired changes.

PRE-BAD DEBT SCREENING AND ACCOUNTABILITY

Mercy also conducts pre-bad debt screening to ensure that patients are eligible for financial assistance before any outstanding debt is sent to collections. This proactive approach preserves patient dignity and ensures that the process is respectful at every stage. This approach paid tremendous dividends, resulting in a significant drop in the amount of debt being placed to an agency. It also reduced the amount of time invested in service recovery efforts.

PATIENT-CENTERED SUPPORT

Mercy's customer service teams are available to guide patients through applications, answer questions and help set up payment plans for any remaining balances. This support prevents patients from facing collection actions whenever possible, ensuring a compassionate, patient-first experience.

OUTREACH AND COMMUNICATION

We actively communicate the availability of financial assistance through various methods, including patient statements, brochures, signage and online resources. This comprehensive outreach ensures that all patients are aware of their options and how to access the support they need.

CONCLUSION

At Mercy, financial assistance is a key component of our mission to provide compassionate and accessible health care. Through transparent eligibility guidelines, multiple application methods and a commitment to ethical billing practices, we ensure that patients are not left without care due to financial barriers. Our patient-centered approach extends beyond clinical care, fostering a culture of dignity, fairness and respect that aligns with our mission to serve and heal.

STERLING COKER serves as the chief revenue cycle officer for Mercy in St. Louis. **GARRETT KATES** is the executive director of patient services for Mercy in Springfield, Missouri.

NOTES

1. "Methodology: Best Hospitals and Surgery Centers for Billing Ethics," *Money*, November 9, 2022, https://money.com/methodology-best-hospitals-billing-ethics/; "Leapfrog Ratings: Mercy Hospital St. Louis," The Leapfrog Group, https://ratings.leapfroggroup.org/facility/details/26-0020/mercy-hospital-st-louis-st-louis-mo. 2. "Patient Financial Communications Adopter Recognition Program," Healthcare Financial Management Association, October 8, 2024, https://www.hfma.org/revenue-cycle/patient-financial-communications/19961/.

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