



Scripts to help your practice collect patient payment at the time of service

Prepared scripts can help your staff consistently communicate the practice's payment policy at the time of service

Talking to patients about money may not be easy, but effective communication regarding patient payments is critical to your practice's financial health. Your practice staff may now say, "It is our payment policy to collect the appropriate payment due from the patient at the time services are rendered. This may only be your copayment and deductible amounts, but we do ask for payment at the time of your visit." However, more specificity may increase your success in collecting payment at the time of service and also ensure consistent patient communications across all staff. **[Note:** Be sure to review your payer contracts for specifics to ensure that they allow your practice to provide price determinations at the point of care and collect from patients at the time of service.]

Offer a script to your front-end practice staff to achieve uniform messaging when requesting payments at the time of service. This can help your practice staff become more comfortable and successful when talking to patients about their financial obligations at the time of service. Make sure, of course, that your practice's written policy is consistent with any verbal representations your staff makes. Here are a few sample scripts to help you get started.

Script 1: Informing the patient that a payment will be due at the time of service during appointment scheduling

[Use this script only when it is clear what services the patient will receive in advance]

Make the patient appointment and perform the insurance eligibility verification request. Upon receiving the response from the insurance eligibility verification request, explain the insurance benefits and coverage details to the patient and inform him or her that payment is due at the time of service:

"According to your insurance benefits, your financial responsibility includes a \$10 copay, 10% coinsurance and a \$1,000 deductible. Your insurance company indicates that you have met \$500 of your annual deductible. Based upon services that will be provided during your appointment, and after combining the \$500 remaining deductible, copay and coinsurance amounts, the total amount you will likely owe at the time of service is \$310. I will be happy to walk you through the price estimation, if you'd like."

Wait for the patient to respond. Be sure to address any questions or comments. Proceed with,

"If I have addressed all of your concerns, I would like to remind you that this is an estimate based on your insurance benefits. There may be additional charges that we cannot predict right now, but if that does occur, we will send you a statement after we have received an explanation of benefits from your insurance company. We accept cash, checks and all major credit cards."

Pause, and if there are no further patient questions or comments, say,

“Have a nice day, [Mr/Mrs/Ms Last Name], we will see you at [time of appointment] on [date of appointment].”

Script 2: For collecting payment from the patient at the time of service upon check-in
[Use this script only when it is clear what services the patient will receive in advance]

When the patient arrives, verify his/her demographics and insurance eligibility and benefits. Upon receiving a response from the health insurer, inform the patient of his or her benefit coverage details, making sure to identify the copay, coinsurance and remaining deductible amounts while maintaining eye contact and a pleasant facial expression:

“[Mr/Mrs/Ms Last Name], according to your insurance benefits, it shows that your financial responsibility includes a \$10 copay, 10% coinsurance and a \$1,000 deductible. Your insurance company indicates that you have met \$500 of your annual deductible. Based upon the services that will be provided during today’s appointment, and combining the \$500 remaining deductible, copay and coinsurance amounts, the total amount you will owe today is \$310. How would you like to pay for this? We accept cash, checks and all major credit cards.”

If the patient has questions relating specifically to the price estimate, review the calculations with the patient in detail. Be sure to refer to your practice’s payment policy for inquiries related to the patient’s inability to make payment at the time of service.

[Note: Since information provided in the eligibility verification response is not a guarantee of coverage for charges, the final amount owed by a patient may change from this estimate. If this should occur, it is highly recommended to reconcile patient accounts immediately.]

Script 3: For collecting payment from patient upon check-out

After the appointment, the medical staff walks the patient to the front desk, says goodbye to the patient and quickly exits the area. The patient is now ready for check-out. Reviewing the patient’s insurance eligibility verification response, say:

“According to your insurance benefit coverage details, your fee today is \$310.”

Look directly at the patient and say,

“How would you like to pay for that—by check, cash or credit card?”

Then wait and allow the patient to answer. **[Note:** Remember, you are not offering a choice of paying or not paying to the patient, but rather are asking which method of payment will be used. If you have to explain the price estimation, do so. Copays should NOT be billed and should be collected at the time of service.]

Look at the patient directly and allow them to answer. Do not speak until the patient has responded to your question. If a patient says they cannot pay the entire amount at the time of service, follow up by asking,

“How much are you able to pay today?”

Thank the patient for whatever amount he or she can pay, and follow up by saying,

“And when do you anticipate paying the balance of today’s visit?”

Be sure the patient commits to a date for that payment and, again, wait for the patient to respond. Sometimes what the patient is able to pay at the time of service is more than you would have asked for previously. Make sure you address the *entire balance*, not just one payment, and then put the new payment arrangement in writing. This creates an agreement that the patient is more apt to abide by, as opposed to an oral agreement.

[Caution: There are many laws governing the extension of consumer credit. If your practice is interested in allowing patients to make payments over time, make sure you contact an experienced attorney to ensure your credit practices meet all applicable regulatory requirements.]

Script 4: When a patient becomes embarrassed or angry

Let the patient speak and attentively listen to him or her without interruption. Then address the issue with compassion, but be direct when stating that you need to work out a solution for payment. It is quite common for patients to believe their insurance isn't paying all it should and to fault the practice for this. Show empathy and say:

“I understand that you're upset about this. Please know that we filed a claim to your insurance company as a courtesy to you in order to limit your financial responsibility. Our practice has a contractual obligation with your insurance company to collect payments at the time of service. However, you are the policyholder, and if you believe your insurance should pay more, we suggest that you contact your insurance company directly. In the meantime, the amount due for today’s visit is \$310. How would you like to make this payment—by cash, check or credit card?”

Wait for the patient to respond and offer the payment. Then say,

“Thank you, [Mr/Mrs/Ms Last Name], for your understanding.”

Remember, patients will respect your asking for payment at the time of service as long as it is done with courtesy and respect. Show kindness, yet expect to be paid!

Visit the [AMA's point-of-care pricing toolkit](#) to view webinars and more information on how to prepare your staff to collect payments at the time of service.