

Patient-centered system recommended for medical billing

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(HealthDay)—Simplification, consolidation, and real time point-of-care

information could address the inefficiencies in the medical billing system, according to an Ideas and Opinions piece published online Feb. 2 in the *Annals of Internal Medicine*.

Hannah Semigran, from Harvard Medical School in Boston, and colleagues discuss problems related to paperwork in the current health insurance system and potential improvements that could be implemented by providers, health plans, and policymakers.

The researchers note that shortcomings of the current system include the number of bills and explanations of benefits (EOBs) that patients receive; the delay in arrival of bills and EOBs; the format of bills and EOBs; the costs associated with the system; and the complexity of the paperwork. The inefficiencies of the system could be addressed by simplification, consolidation, and real-time point-of-care cost information. Bills and EOBs should be simplified and should not use only medical coding or include extraneous information. Bills and EOBs should be consolidated and distributed in a timely manner, with patients receiving one bill per episode of care. A more patient-centered system should also incorporate a real-time checkout model, providing patients with an estimated cost before and final bill immediately after provision of care.

"Health care reform efforts have largely focused on improving 'front-end' clinical interactions while neglecting 'back-end' billing systems," the authors write. "Redesign of the billing system would relieve a common frustration and is critical for a more patient-centered health care system."

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