Oracle Health Claims, Prior Authorizations, and Payments

Patient Bill Estimates User Guide

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1 Get Started

The information on getting started with Patient Bill Estimates is outlined below.

The Get Started section contains the following sections:

Introduction

Patient Bill Estimates is a feature, powered by the Patient Bill Estimates AI Agent, that automates generating an estimate of patient's out-of-pocket costs (patient responsibility) for expected healthcare services before they are created.

In Oracle Health Patient Administration (PAS), provider staff can use the new Patient Bill Estimates feature to automatically generate patient bill estimates for scheduled appointments using the new Patient Bill Estimates AI Agent. This feature allows provider staff to review estimate details, modify expected services, and generate a revised estimate before approving it. It also allows provider staff to generate a PDF document of the estimate with a standard disclaimer.

The system uses the information outlined below for the patient and the expected services to calculate the patient's estimate out-of-pocket costs (patient responsibility). The AI agent applies the payer contracted rates or self-pay discounts and generates the detailed estimates, including an itemized list of expected services and breakdown of patient responsibility as output.

- Demographics
- Insurance eligibility
- Coverage
- Benefit details
- Scheduled appointment and encounter details
- Provider's payer contract data
- Expected services (procedures, tests, and so on) identified using historical billing/claims patterns and clinical context

The Patient Bill Estimates service provides the following benefits:

- Patient satisfaction scores can improve as transparent billing estimates help patients understand their financial responsibility upfront.
- Increase patient collections by providing the patient responsibility and collecting payment at the time of registration or scheduling.

> **Note**
>
> In a future release, the Patient Bill Estimates feature can be integrated in other workflows.

Activate Your Account

Not applicable.

Sign In

The information below outlines accessing the Bill Patient Estimates service.

To access the Bill Patient Estimates service, see the Access Oracle Health Patient Administration section in the Oracle Health Patient Administration Scheduler and Registrar User Guide for details.

Requirements

Ensure that you are logged in to Oracle Health Patient Administration (PAS) to view, review, and approve patient bill estimates generated for scheduled appointments.

The following information is required for using Patient Bill Estimates:

- Coverage agent for eligibility check and benefit details.
- Charge agent for creating expected charges for estimation.
- Provider's payer contract data must be set up for contracted payer rates and self-pay discounts.
- Provider's health plan participation must be set up.

If a health plan participation or a payer contract is not set up for an insurance allocated to the patient visit, then the following actions occur:

- Expected insurance payment is calculated at 100% of the price (provider charge).
- Patient responsibility is calculated as $0.

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Patient Bill Estimates

The Patient Bill Estimates feature generates an estimate of a patient's potential out-of-pocket costs for a scheduled appointment using the Patient Bill Estimates AI Agent.

The following information outlines the process for self-pay, uninsured, and insured patients:

- For self-pay or uninsured patients, it calculates the estimated patient responsibility based on price (provider charge). If a self-pay contract is set up with a self-pay discount, it calculates the estimated patient responsibility by applying the self-pay discount.
- For insured patients, it calculates the estimated patient responsibility by applying the contracted payer rates and patient's insurance benefits added by the coverage agent using the eligibility check.

> **Note**
>
> If a health plan participation or a payer contract is not set up for an insurance allocated to the patient visit, then the expected insurance payment is calculated at 100% of price (provider charge) and the patient responsibility is calculated as $0.

Generate Patient Bill Estimates for Scheduled Appointments

The steps below are required for generating a patient's bill estimate.

1. Log in to Oracle Health Patient Administration (PAS) and follow the tasks below before moving to Step 2.
   a. Manage financial responsibility. See Manage Financial Responsibility at the Patient Level in Oracle Health Patient Administration.
   b. Schedule an appointment. See Schedule an Appointment in Oracle Health Patient Administration.
2. Once the steps outlined in Step 1 are complete, access the Encounter View for the scheduled appointment.
3. Manage insurance allocation.
   a. If a single insurance is added at the patient level, then that insurance is automatically allocated to the visit/encounter created for the scheduled appointment.
   b. If multiple insurances are added at the patient level, then manually allocate one or more insurances to the visit/encounter created for the scheduled appointment.
4. Once the insurance allocation is complete, an eligibility check is automatically begun by using the coverage agent.
5. Once the coverage agent returns the eligibility response, an estimate is requested automatically.

View an Estimate

The steps below outline viewing an estimate generated for the scheduled appointment:

1. On the Encounter View for the scheduled appointment, select **Manage Financial Responsibility**. The Financial Responsibility page is displayed with the following information:
   - **Guarantors**: Displays all the guarantors.
   - **Insurance**: Displays the names of the insurance for the patient with the following information:
     – **Subscriber Member ID**: Displays the name of the patient and the member ID.
     – **Eligibility Status**: Displays a link to view eligibility details and the date of the last update.
     – **Allocation and Verification Status**: Displays the status of the insurance confirmation.
   - **Estimate**: Displays an estimate for patient's financial responsibility
2. In the Estimate section, you can view the following information:
   - Total estimated patient responsibility (estimate of patient's total out-of-pocket costs).
   - AI-generated explanation of the expected services or procedures identified based on appointment and visit details, patient demographics, historical billing patterns, and clinical context.
   - Estimate details with the following information:
     – Primary service requested, expected date of service, and date of estimate.
     – Provider or facility information.
     – Estimated summary with a breakdown of the patient's responsibility into copay, co-insurance, deductible, and non-covered charges.
     – Itemized list of services with their descriptions, service/procedure codes, price (provider charge), and estimated patient responsibility.
   - Estimates generated in the past for the visit/encounter.

Modify and Recalculate an Estimate

The steps below are required for modifying an estimate.

1. On the Manage Financial Responsibility page, in the Estimate section, select **Edit**. The Services page is displayed.
2. On the Services page, you can add or remove a service:
   a. In the upper-right section of the page, select the **plus sign** (+). See Add a Service for further details.
   b. In the Action column, select the **trash can** icon to remove the service.

Add a Service

The information below outlines the steps required to add a service.

1. On the Manage Financial Responsibility page, in the Estimate section, select **Edit**. The Services page is displayed.
2. Select the **plus sign** (+). The Chargemaster Search page is displayed.
3. To add a service using the Chargemaster Search, use one of the following fields to search for a service:
    a. In the Procedure Code field, enter the **CPT** or **HCPCS** code.
    b. In the CDM Code field, enter the CDM (chargemaster) code.
    c. In the Description field, enter a short description.
4. Select **Search**. The search results are displayed.
5. From the list of results, select the applicable row, and then select one of the following options:
    - Optionally, the user can provide additional service details by selecting **Save and Next**. The Items Details page is displayed.
        – In The Details section, enter information for the following fields: Quantity, Performing Location, Rendering Physician, and Ordering Physician.
        – Once the optional details are entered, select **Save and Next**. The Services page is displayed with the services added or removed.
    - To save with no additional details, select **Save and Close**. The Services page is displayed with no additional services added.
6. Select **Recalculate and Close** to close the services page and recalculate the estimate. The existing estimate is moved to the past estimates and a new estimate is requested with the modified list of services.
7. Select **Cancel** to cancel the service list changes.

Approve an Estimate

The information below outlines the information for approving an estimate.

On the Manage Financial Responsibility page, in the Estimate section, select **Approve**.

- Estimate status is now displayed as Active.
- New Estimate button is displayed. See Generate a New Estimate for details.
- View document icon is displayed next to the New Estimate button. See Generate PDF for details.

Generate a New Estimate

The information below outlines requesting a new estimate.

On the Manage Financial Responsibility page, in the Estimate section, select **New Estimate**. The existing estimate is moved to past estimates and a new estimate is requested. The AI Agent executes the estimation generation workflow from the beginning to generate a new estimate.

Generate PDF

To generate a PDF for an approved estimate, select the **view document** icon located to the right of the New Estimate button. A new browser tab opens with the estimate generated in a PDF file.

View Past Estimates

The tasks below outline how to view past estimates.

1. On the Manage Financial Responsibility page, access the Past Estimates section.
2. Select the view document icon located to the right of the New Estimate button. If applicable, the past estimates are displayed.

Error Messages

The information below outlines the messages that may display during the patient bill estimate.

Table 2-1 Patient Bill Statuses

Error Message	Description
Currently, a new estimate cannot be generated as the eligibility checks for insurances allocated to this visit are pending. Please try again after the eligibility checks are completed and successful.	Eligibility check for insurances allocated to a patient visit are not complete.
Error <error description>	The system failed to generate an estimate.
Total Estimated Patient Responsibility: XX	Displays an estimate of total out-of-pocket cost (patient responsibility) combining costs of all expected services/procedure identified.

Statuses

The following table describes different statuses of a patient bill estimate:

- **Requested**: A new estimate is requested.
- **In Progress**: The estimate generation is in progress.
- **Draft**: An estimate is generated successfully and is ready for user review.
- **Error**: The system failed to generate an estimate due to an error.
- **Active**: The estimate is approved and a PDF of the estimate can be generated.

Glossary

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