PayZen

Patient Financing | Best in KLAS 2026

Considering PayZen?

For health systems evaluating their patient financing model

TECHNOLOGY-DRIVEN FINANCING — NO RESERVE ACCOUNT, NO RECOURSE DRAG

Bank-sponsored patient financing programs bring institutional credibility, but the structure matters as much as the brand. Programs that require a funded reserve account tie up health system capital upfront and return a meaningful share of accounts when patients don't complete their plans.

PayZen is a technology platform, with AI underwriting, native integration with Epic, Cedar, FlyWire, RevSpring, and more, plus automated patient servicing, built to maximize plan completion, not just enrollment. No reserve account is required. Plans are personalized to each patient's actual ability to pay using six years of provider, insurance, and outcome data. Non-recourse pre-funding is available for providers who want to remove default risk from their books entirely.

Ranked #1 by healthcare organizations nationwide

"We had our doubts early on, especially with so many patient financing options charging fees or underdelivering. But PayZen earned our trust with the Care Card. They provided real value, respected our existing programs, and they were material in helping us reduce bad debt."

Beth Arter, Corporate Director of Patient Access, Cape Fear Valley Health

CAPE FEAR VALLEY HEALTH

PayZen Results

~30%	average collections lift vs. pre-PayZen baseline across our customer base
~30%	Reduction in bad debt vs. baseline
78%	offer acceptance rate — patients offered a plan who enroll
<2 MIN	patient enrollment process — digital, in-workflow, no separate application
100%	of surveyed clients say they would integrate with PayZen again

Ready to see the difference?

Request a side-by-side comparison or schedule a 20-minute demo.

Questions Worth Exploring

As you evaluate patient financing options, these questions can help you surface what matters most:

1. What recourse rate did your current vendor indicate, and have you measured what actually materializes on a mature vintage?
2. How much capital is currently sitting in your reserve account, and how is that balance invested?
3. What does your team's operational responsibility look like when an account recourses, staff time, re-entry, collections handoff?
4. How is your current program integrated into your Epic workflow — embedded, or a separate patient-facing step?