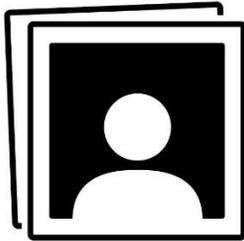


No-show fees in medical practices on the rise to balance bumpy attendance rates

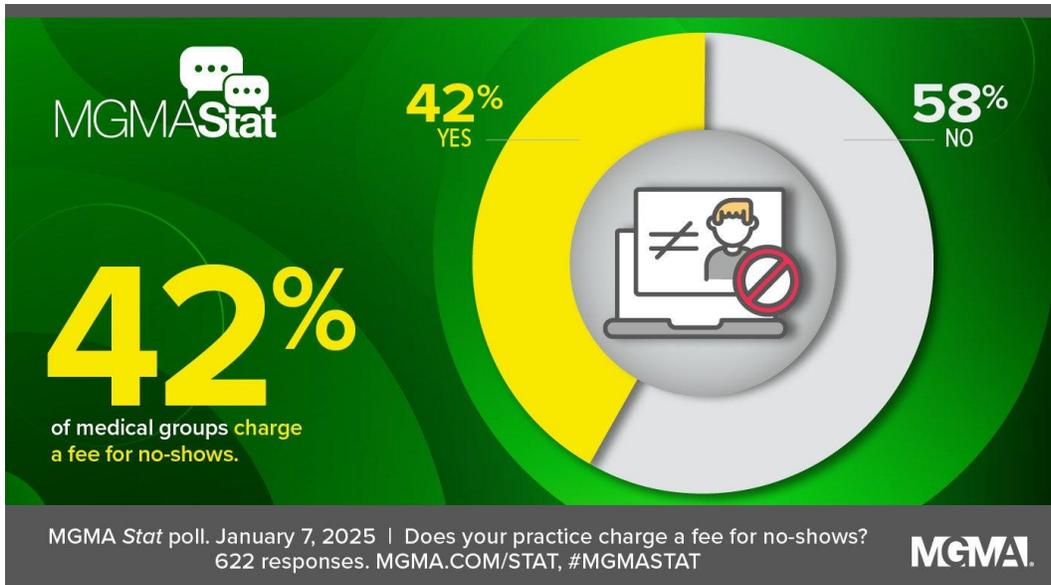
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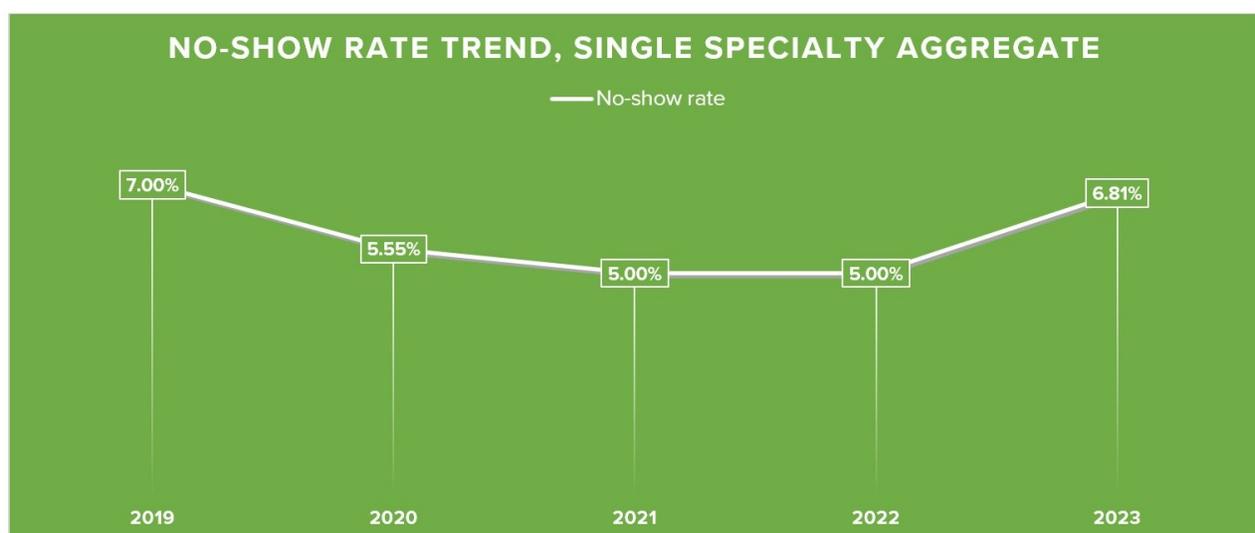
Patient no-show rates have rebounded back to pre-pandemic levels, while appointment reschedule rates have dipped closer to their pre-COVID-19 benchmarks. As a result, many medical groups are increasingly embracing no-show fees for missed appointments.



A Jan. 7, 2025, [MGMA Stat](#) poll found that 42% of medical group leaders report their practices using a no-show fee compared to 58% that do not. The poll had 622 applicable responses.

Among responding practice leaders, the majority (58%) said their no-show rates in 2024 remained consistent with 2023 levels, while 22% reported improvements and 20% said no-shows worsened last year. These findings suggest some improvement in recent months compared to [an August 2024 MGMA Stat poll](#), which found that more than one-third (37%) of medical group leaders had seen an increase in patient no-shows, 50% reported steady rates and only 18% noted a decrease in no-shows.

Practices that charge a no-show fee reported more improvement in no-show rates in 2024 (25%) compared to practices without a no-show fee (16%).



*Single Specialty Aggregate combines Primary Care, Nonsurgical and Surgical single specialty practice data.

MGMA DataDive Practice Operations data show that the single-specialty aggregate no-show rate — combining primary care, nonsurgical and surgical single-specialty practice data — fell to 5.55% in 2020 and remained at 5% in 2021 and 2022. However, it rose to 6.81% in 2023, nearing the pre-pandemic benchmark of 7% recorded in 2019.

Some of the key factors in the no-show trend were:

- **Rapid expansion of telehealth:** Despite the disruption of COVID-19, telehealth saw rapid growth due to its lower barriers to attendance for audio or video visits — removing the need for patient travel or childcare arrangements — and the added comfort and safety of limiting in-person contact during the public health emergency.
- **Gradual return to in-person care:** As daily routines returned to pre-pandemic norms in 2022 and 2023 (e.g., commutes, in-person work), the same factors that often caused missed or forgotten appointments before COVID-19 reintroduced scheduling complexities for both patients and practices. [See the appointment reschedule rate trend below, which shows a higher percentage of appointments rescheduled within 30 days from 2020 to 2022 before returning to 2019 levels in 2023.]

Best practices for no-show fee policies

1. Communicate your policy clearly and early

Introduce the no-show policy to new patients and have them sign an acknowledgment form. Include the policy in appointment reminders and prominently display it on the practice website. For procedures, incorporate the policy into pre-surgical counseling alongside informed consent, emphasizing the higher stakes of missed procedures. Transparent communication reduces confusion and promotes patient compliance.

2. Define a reasonable notice period and fee

Require 24 to 48 hours' notice for cancellations to avoid a fee. Set fees that reflect administrative costs without being overly punitive. In primary care, fees might range from \$25 to \$50, while surgical settings may warrant higher fees or deposits due to operating room time and staff scheduling being more resource intensive. A standard cancellation window allows practices to reallocate time slots effectively and encourages responsible planning by patients responsibly.

3. Offer flexible payment and waiver options

Provide options for hardship waivers or one-time courtesy waivers (e.g., particularly in cases of emergencies). Outline how patients can request leniency. Flexibility ensures fairness and fosters goodwill.

4. Align fee collection with specialty payment practices

Establish a consistent practice for collecting no-show fees, whether as standalone charges, at the next visit check-in or by invoice. Consistency in billing processes helps staff implement the policy efficiently. For visit-based settings, fees can be billed to a patient's account for collection during their next visit. In procedural settings, missed appointments may result in deposit forfeiture or direct billing after a cancellation.

5. Use appointment reminders and tracking

Send reminders (text, email, or phone) that highlight both the upcoming appointment and the no-show fee policy. Track cancellations and no-shows in the patient records. To identify patterns, enable targeted outreach or alternative scheduling solutions. Clear reminders reduce forgetfulness and reinforce the policy.

A well-structured no-show fee policy must be fair, consistently enforced, and clearly communicated to patients. While the underlying principles are similar across specialties, procedure-based settings often involve higher financial stakes and more complex logistics,

necessitating stricter policies, higher fees, or frequent collection of deposits or advanced payments.

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Additional resources

- "Patient no-shows holding steady at medical groups in 2023" ([MGMA Stat](#))
- "Accurately predicting no-shows with advanced analytics to address patient access" ([MGMA Stat](#))
- "Better patient communication to balance your approach to deterring no-show appointments" ([Insight article](#))