

Green Belt Agency Seal

Green Belt Six Sigma Project Report Out
Rosaland M. Gatewood–Tye
Ohio Mental Health and Addiction Services
December 2, 2014

THE ABILITY TO PAY

The Team



Team Members and Roles

- ▶ **Senior Leadership:**
 - Assistant Director – Jim Lapczynski
- ▶ **Sponsor communicates with Sr. Leadership on results & issues**
 - Bob Short
- ▶ **Team Leader ensures the team is making progress**
 - Rosaland Gatewood–Tye
- ▶ **Subject Matter Experts**

Betty Taylor	Beth Hill	Legal (On Call)
Amanda Parson	Janice Harris	HR (on Call)
Dianne Harris	Judith Hink	
- ▶ **Consumer participant provided by OhioMHAS Clients Right Advocate**
- ▶ **Fresh prospective participant Angie Martin (ODJFS)**

Background

- ▶ Why are we doing this event? Industry standard change and the current process significantly impacted the reduction to revenues
- ▶ The result carries over into cost reporting audits and ultimately negative findings
- ▶ The primary issue for disallowance were due to inconsistent treatment of Medicare and Non Medicare patient accounts
- ▶ What needs to change? The current process used to determine the patient ability to pay.
- ▶ Complete AFA form (or what will be determined the tool)
- ▶ Theme for the event? A Clean Process: First Time Quality – One that is standard, auditable and implemented

Event Scope

▶ First step

- Our process begins with Patient intake – Initial gathering of information from patient

▶ Final step

- Patients are liable for their care and should have an ability to pay determination completed which includes; an assessment of their benefit to accurately apply payer responsibility, payer order and any applicable discount and/or waivers.

- Medicare
- Medicaid
- Third Party –Payers (Insurance)
- Dual Eligible
- Worker Compensation & VA
- Self – Pay
- Dual Eligible

Project Goals

1. Standardize the current process (by evaluating AFA form, rules, timing constraints, compliance, similar state best practices) and establishing a clean sheet redesign in 2-3 days

2. Eliminate system weakness and inconsistencies identified in baseline data to increasing reimbursements

3. Eliminate disallowances associated with audit findings in the ability to pay process

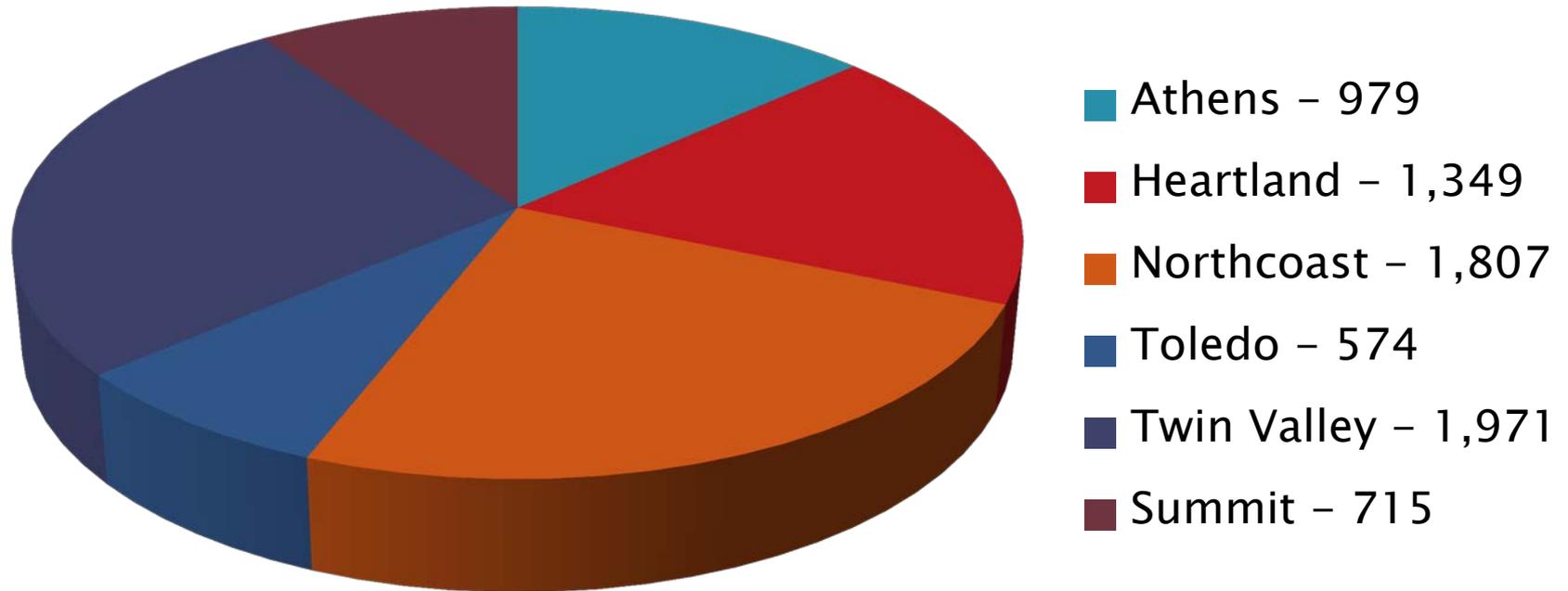
Baseline data

- SFY13 will be used for Baseline data
 - Admissions
 - AFA Forms
 - Is the AFA form the process whereby the Department reviews the patient's total resources? If not, is there supplemental investigation that occurs? Please list the various avenues to determine the patient's ability to pay. Is there an agency developed guideline to determine this?
- Funding disallowed due to the unclear process
- All Regional Psychiatric Facilities are included
- Source of data (internal systems) PCS and FABS

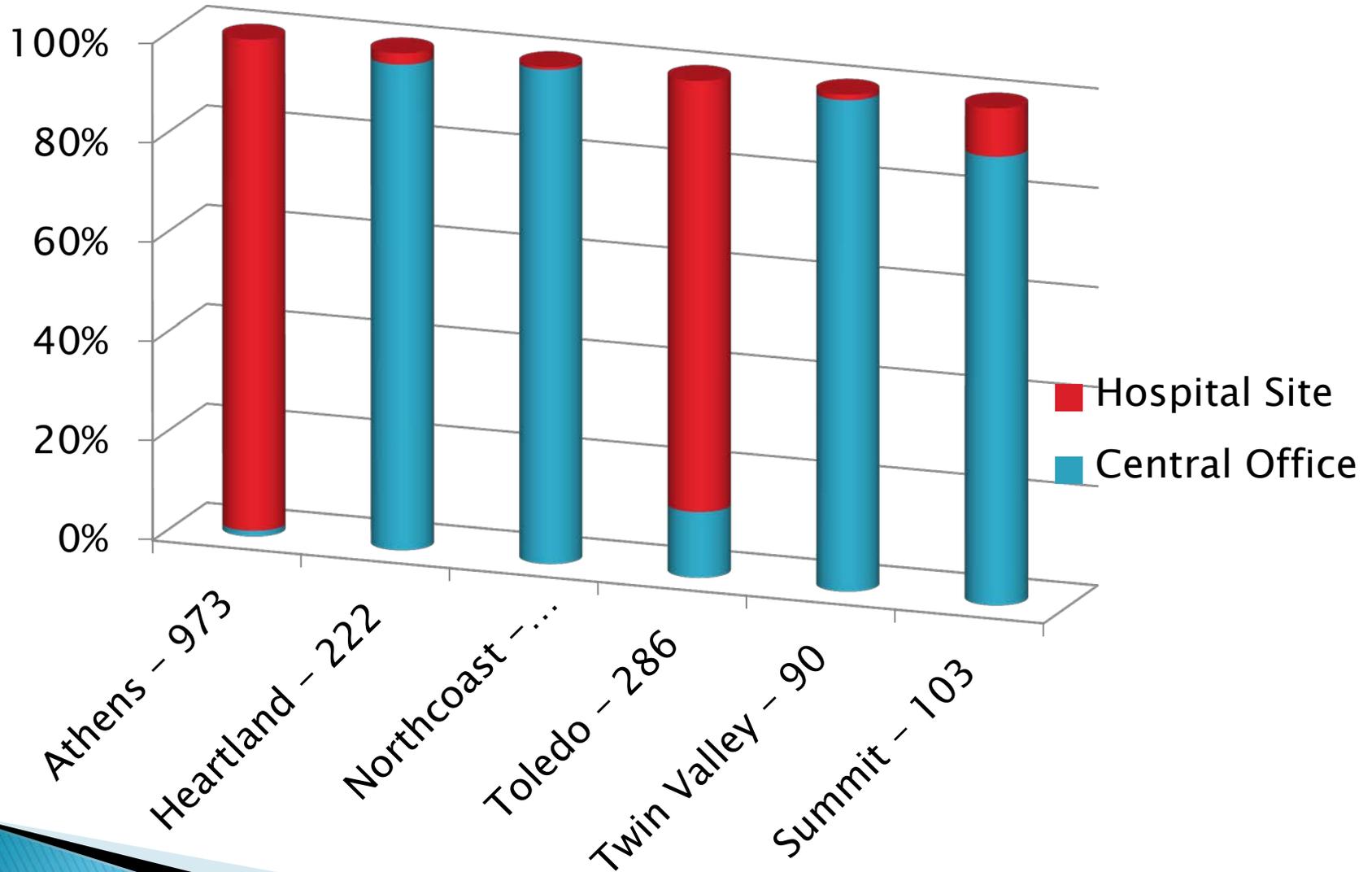
Admission Data SFY13

Information provided by PCS

Total Admissions 7,395



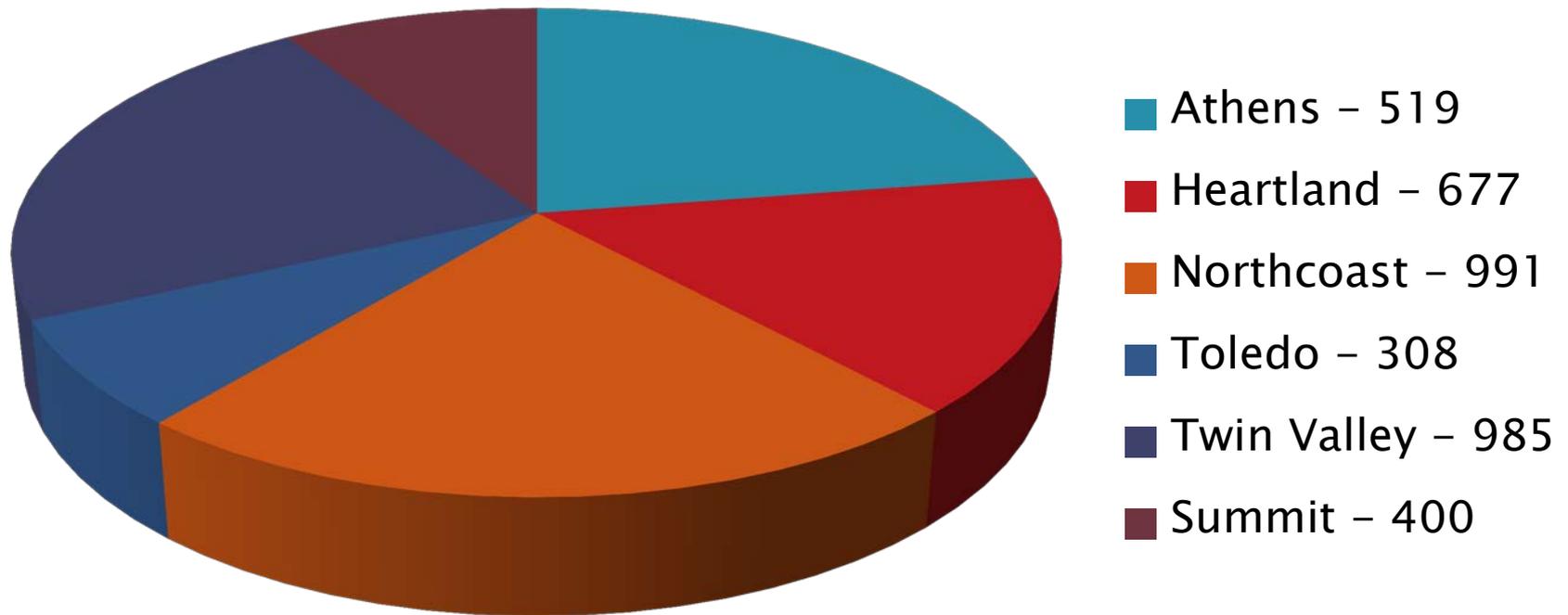
Data Collection: SFY 2013 AFA Entry Point



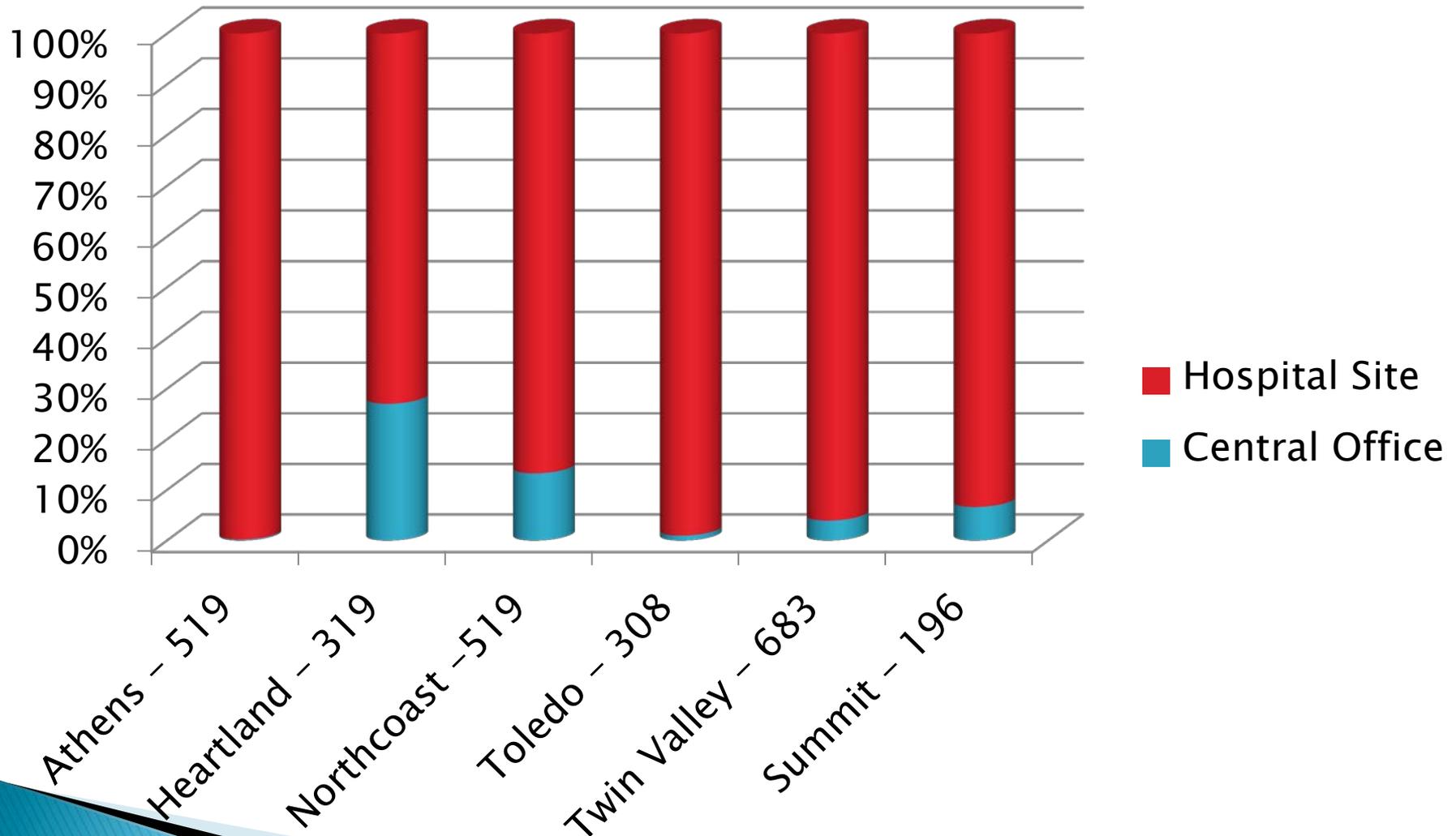
Admission Data Jan – July 2014

Information provided by PCS

Total Admissions 3,880

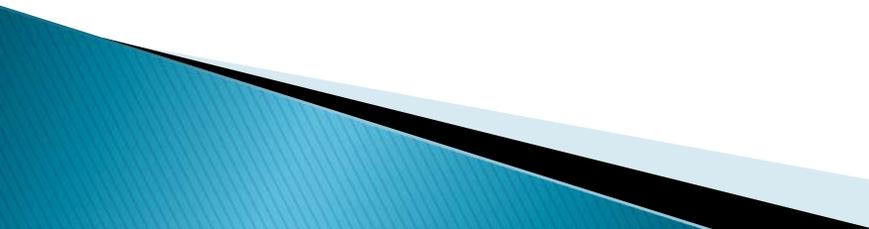


Data Collection Points: Jan-July 2014 AFA Entry



Event Measures

- ▶ Measurable items that we will work with on this project:
 - AFA Form
 - Cover 4 areas Income, Assets, Expense and Liabilities
 - Additional requirements – Alimony and Child Support
 - Incomplete Patient information
 - Demonstration of attempt to collect
 - Patient signatures

 - ▶ What metrics do we want to improve:
 - Method for collecting patient information
 - Billing Matrix
 - Processing time
 - Backlog reduction
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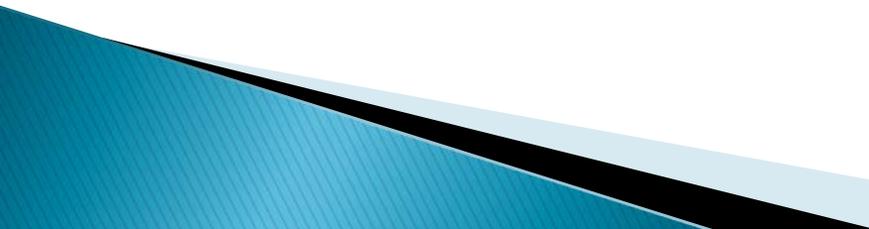
High Level Process Map SIPOC

Suppliers	Inputs	Process	Output	Customers
PCS	Client Demographics	Patient Admission	AFA form	Patients Family
Patient Guardian Spouse	Income Assets	Check Eligibility	Payer Order	Federal Offices
Medicaid Medicare Insurance	Resources Property	Complete AFA	Medicare Letters	Insurance
Automated Processes	Employment	Data Entry	MSP Forms	CGS Medicare
Case Manager Social Workers	Past Records	Payer Order Determination of Payer	Legal Requirements	MITZ
HIPPA	Insurance Cards		Bill	Central Office
Referring Agencies	AFA & Related Forms		Data from FABS	Hospitals
			Care in Community	Liabile Party
				Discharge Planning

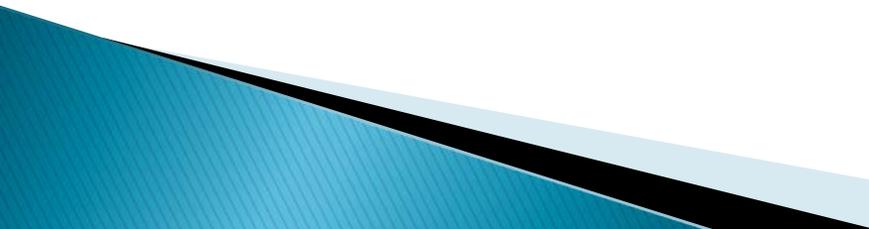
Current State



Assumption List

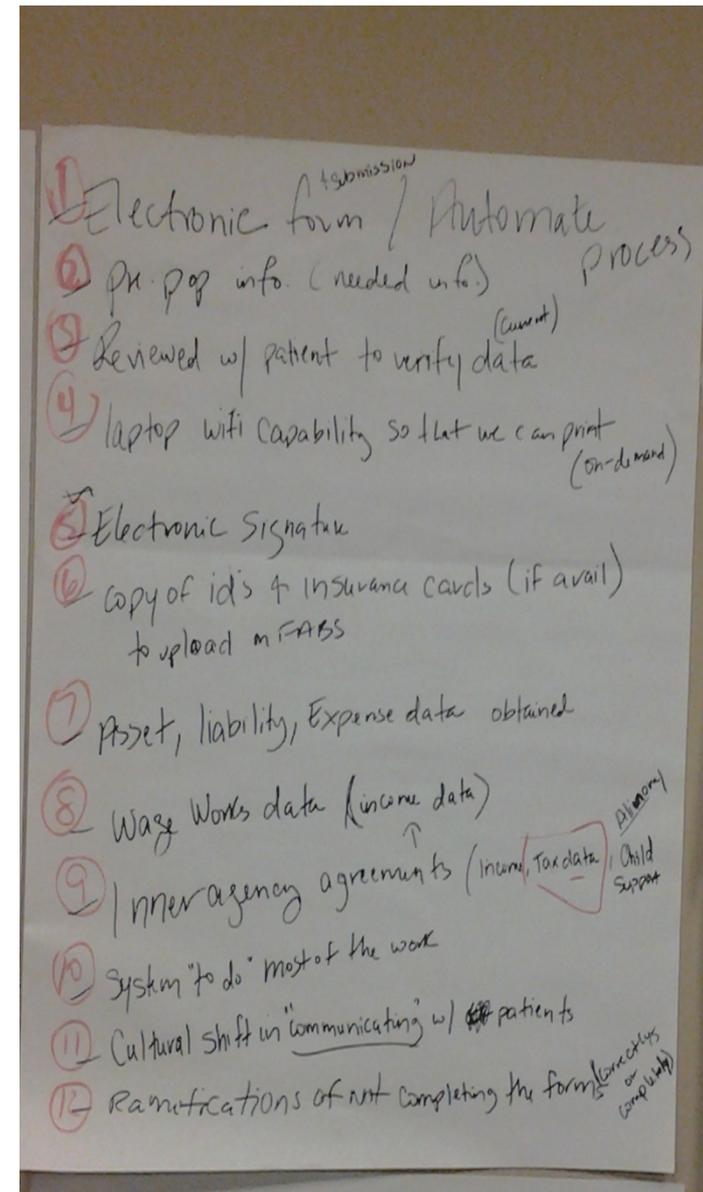
- 1) Define Due Diligence
 - 2) Define Attempts and how many attempts
 - 3) New improved PDF fillable Form
 - 4) Added Fields on AFA
 - 1) SSDI, Alimony, Child Support
 - 2) Patient Homeless Indicator No Income – How supported
 - 3) Include Expenses
 - 4) Laptop for staff use
 - 5) Signature pad or ability to print AFA on unit
 - 5) Interagency Agreements in place
 - 6) Policy and Procedures put in place
 - 7) Identify key workers
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Specific Centers for Medicare & Medicaid Services (CMS) comments Build into AFA Form Redesign

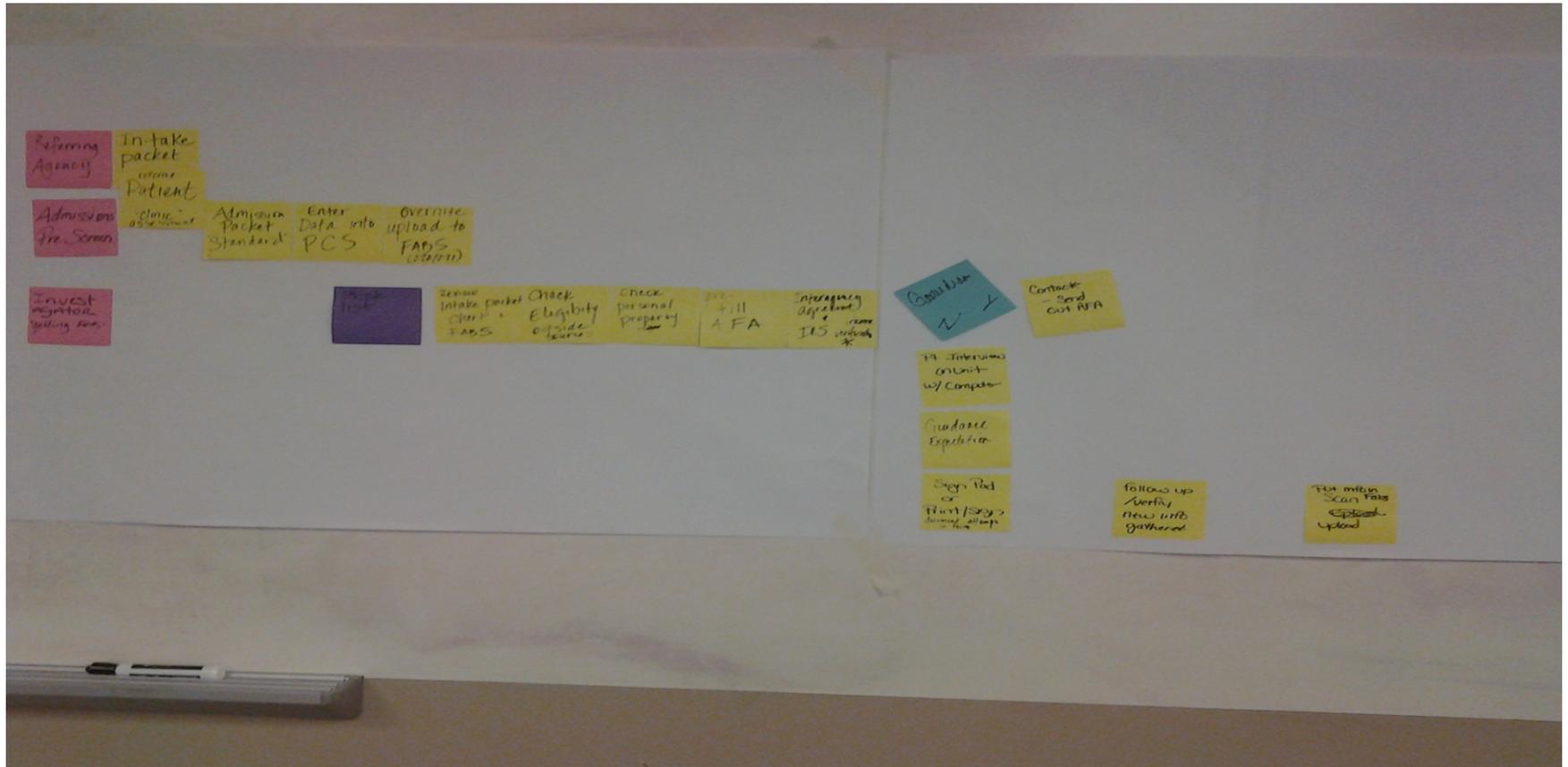
1. Process should include Income Assets Expenses and Liabilities
 2. Alimony and Child Support should be included
 3. Demonstration of attempt to get information including notes on who we talked to
 4. Form should be signed. If patient refuses we should note date it and try again later. Stopping after one attempt is not sufficient
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Brainstorm-Results

Common	Unique
Electronic/PDF fillable form	Data Definitions
Signature Pad	Using Data in admission patient
Laptop	Who does the work
Interagency Agreement verify wage information	
Document /illustration of due diligence	
Policy and Procedures Fix Form Guardian/Liable Party	



Clean Sheet Redesign



Due Diligence Defined

Attempt = Actual interaction with Client

Due Diligence = Complete and Signature

- First within 72 hours of Admission
- 3 Attempts with in 10-14 Days

Documented on Form and Commented in FABS



Documented Policies and Procedures

- ▶ Intake process addendum – check admission procedures
 - ▶ Check Desk Manual usage @RPH and update if needed
 - ▶ Check e-zone to review policy/procedure re: Ability to Pay
 - ▶ Centralize policy/procedures
 - ▶ Check RPH for local policy and procedures
 - ▶ Create Ability to pay Policy
 - ▶ Check hospital discharge policy
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Scorecard

Measure	Current Level	Future	Change
Tasks	28	16	43%
Functions	6	3	50%
Decisions	7	1	86%
Variation	6	0	100%

Address All Audit Findings in this Process!!!!

What Begins Monday? Implementation Plan

Week Ending	
09/26/14	Complete AFA Form
	Define Agency needs for Interagency Agreements for Patient financial information
	Meet with Agencies if appropriate
	Draft Agency Agreements if needed
	Implement Agency Agreements
10/03-10/14	Report Out of LEAN event
	Pilot new AFA form
	Research Electronic Signature
	Research transfer of documents
10/17-24/14	Develop & Test Client/Guardian Communication
	30 Day Check-in
	Prelim visit to all hospitals complete
	AFA Legal Review
10/27/14	New Process LIVE
	Get Laptops
	Train Staff on new Process
11/7/14	New Policy and Procedures Written –DRAFT
	New Policy and Procedures Approved
	Implement Electronic Signature

Special *thanks* to...

Senior Leadership,
Sponsor, LEAN Ohio and
Mentors

Subject Matter Experts,
Consumer, Fresh
Prospective