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Utilizing Lean Methodologies to Automate the OACC Medicare Cost Report

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Utilizing Lean Methodologies to Automate the OACC Medicare Cost Report

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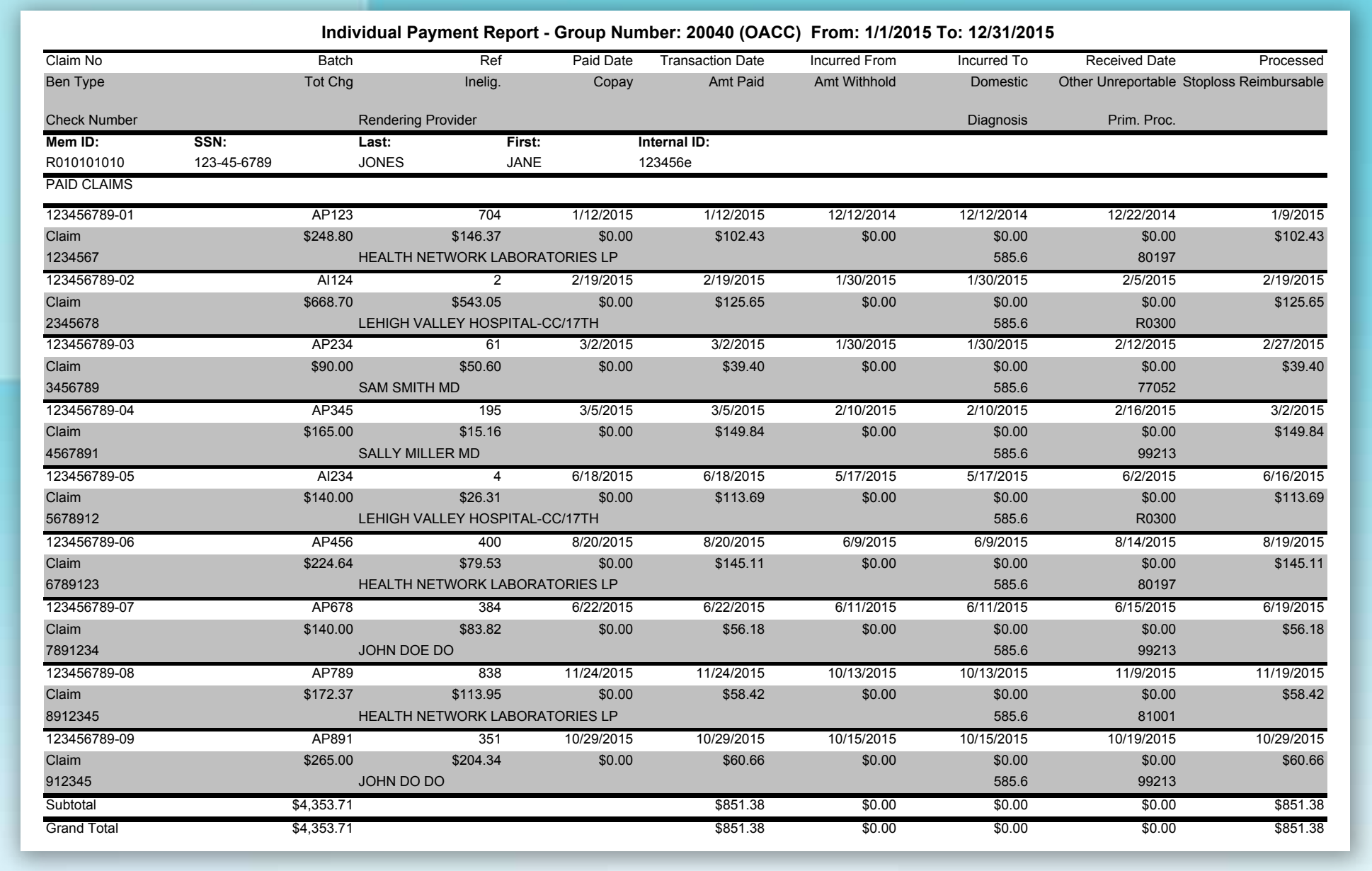
Introduction

The creation of the OACC (Organ Acquisition Cost Center) Medicare Cost Report is a tedious time consuming task of data collection. The transplant financial counselors' time was spent processing claims and preparing the supporting documentation for the cost report, instead of with direct patient care. Through the implementation of multiple lean methodologies and collaboration with Populytics, a third party administrator to automate the claims processing and streamline workflows, the financial counselor has increased availability for direct patient interactions.

Approach

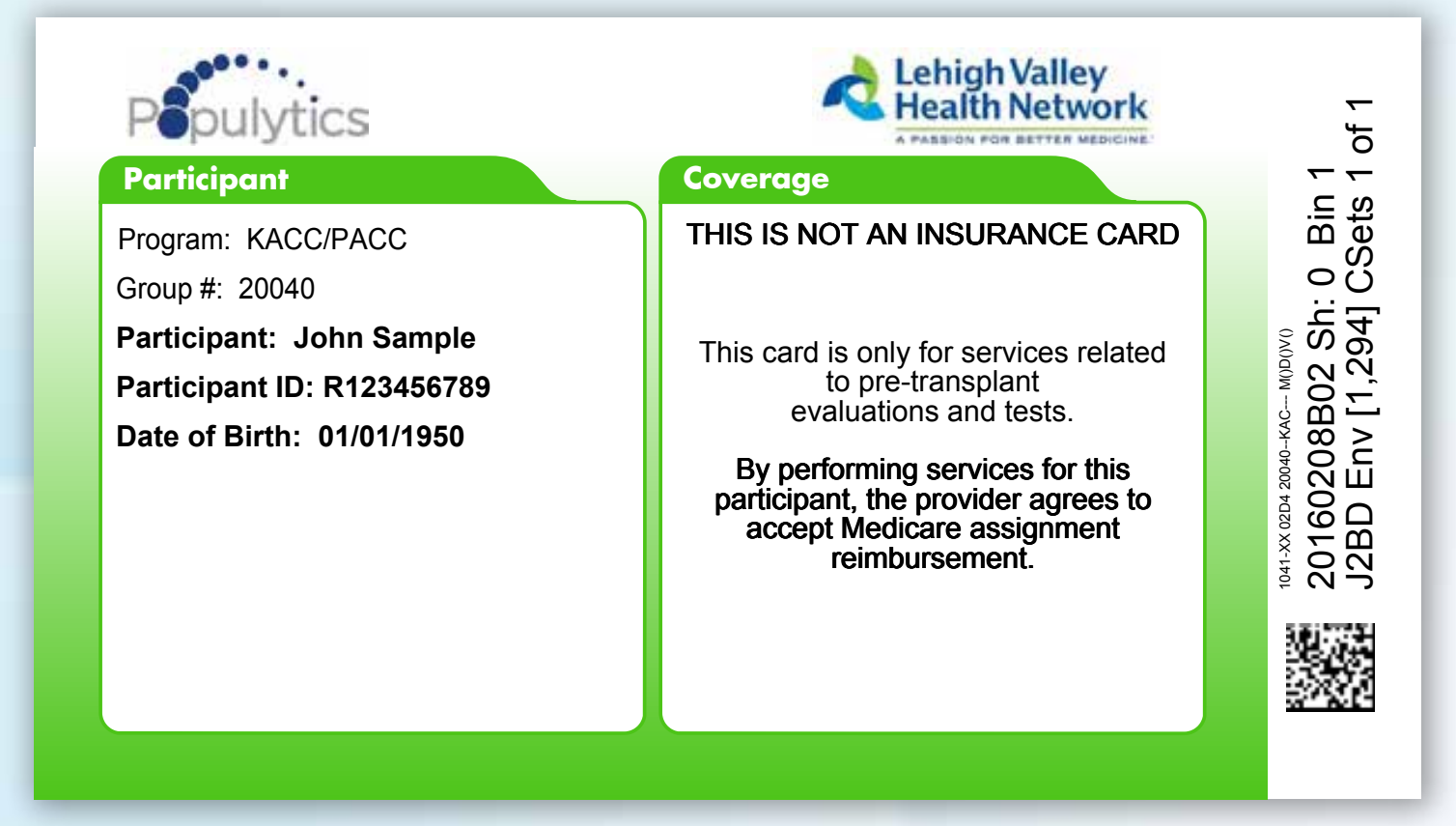
Lean methodology was applied to the manual process of creating the OACC Medicare Cost Report Cost Report. The two day Kaizen event included Value Stream mapping prepared by the frontline, administrative, financial and clinical representatives. Each decision point in the process was analysed based on value added criteria. Twenty five areas for streamlining/automation were identified and prioritized for the preparation of the OACC Medicare Cost Report.

As the administrator supporting the adjudication of claims for the transplant program. Populytics was engaged to assist in the automation of patient eligibility, in network and out of network claims, automated report generation, OACC patient identification cards and the ability to field calls from patients and/or providers as necessary in reference to OACC rules.



Individual Payment Report - Group Number: 20040 (OACC) From: 1/1/2015 To: 12/31/2015

Claim No	Batch	Ref	Paid Date	Transaction Date	Incurred From	Incurred To	Received Date	Processed
Ben Type	Tot Chg	Inelig.	Copay	Amt Paid	Amt Withhold	Domestic	Other Unreportable	Stoploss Reimbursable
Check Number		Rendering Provider				Diagnosis	Prim. Proc.	
Mem ID:	**SSN:**	**Last:**	**First:**	**Internal ID:**				
R010101010	123-45-6789	JONES	JANE	123456e				
PAID CLAIMS								
123456789-01	AP123	704	1/12/2015	1/12/2015	12/12/2014	12/12/2014	12/22/2014	1/9/2015
Claim	$248.80	$146.37	$0.00	$102.43	$0.00	$0.00	$0.00	$102.43
1234567		HEALTH NETWORK LABORATORIES LP				585.6	80197	
123456789-02	AI124	2	2/19/2015	2/19/2015	1/30/2015	1/30/2015	2/5/2015	2/19/2015
Claim	$668.70	$543.05	$0.00	$125.65	$0.00	$0.00	$0.00	$125.65
2345678		LEHIGH VALLEY HOSPITAL-CC/17TH				585.6	R0300	
123456789-03	AP234	61	3/2/2015	3/2/2015	1/30/2015	1/30/2015	2/12/2015	2/27/2015
Claim	$90.00	$50.60	$0.00	$39.40	$0.00	$0.00	$0.00	$39.40
3456789		SAM SMITH MD				585.6	77052	
123456789-04	AP345	195	3/5/2015	3/5/2015	2/10/2015	2/10/2015	2/16/2015	3/2/2015
Claim	$165.00	$15.16	$0.00	$149.84	$0.00	$0.00	$0.00	$149.84
4567891		SALLY MILLER MD				585.6	99213	
123456789-05	AI234	4	6/18/2015	6/18/2015	5/17/2015	5/17/2015	6/2/2015	6/16/2015
Claim	$140.00	$26.31	$0.00	$113.69	$0.00	$0.00	$0.00	$113.69
5678912		LEHIGH VALLEY HOSPITAL-CC/17TH				585.6	R0300	
123456789-06	AP456	400	8/20/2015	8/20/2015	6/9/2015	6/9/2015	8/14/2015	8/19/2015
Claim	$224.64	$79.53	$0.00	$145.11	$0.00	$0.00	$0.00	$145.11
6789123		HEALTH NETWORK LABORATORIES LP				585.6	80197	
123456789-07	AP678	384	6/22/2015	6/22/2015	6/11/2015	6/11/2015	6/15/2015	6/19/2015
Claim	$140.00	$83.82	$0.00	$56.18	$0.00	$0.00	$0.00	$56.18
7891234		JOHN DOE DO				585.6	99213	
123456789-08	AP789	838	11/24/2015	11/24/2015	10/13/2015	10/13/2015	11/9/2015	11/19/2015
Claim	$172.37	$113.95	$0.00	$58.42	$0.00	$0.00	$0.00	$58.42
8912345		HEALTH NETWORK LABORATORIES LP				585.6	81001	
123456789-09	AP891	351	10/29/2015	10/29/2015	10/15/2015	10/15/2015	10/19/2015	10/29/2015
Claim	$265.00	$204.34	$0.00	$60.66	$0.00	$0.00	$0.00	$60.66
912345		JOHN DO DO				585.6	99213	
Subtotal	$4,353.71			$851.38	$0.00	$0.00	$0.00	$851.38
Grand Total	$4,353.71			$851.38	$0.00	$0.00	$0.00	$851.38



Participant

Program: KACC/PACC
Group #: 20040
Participant: John Sample
Participant ID: R123456789
Date of Birth: 01/01/1950

Coverage

THIS IS NOT AN INSURANCE CARD

This card is only for services related to pre-transplant evaluations and tests.

By performing services for this participant, the provider agrees to accept Medicare assignment reimbursement.

1041-XX 02D4 20040--KAC--- M()D()V()
20160208B02 Sh: 0 Bin 1
J2BD Env [1,294] CSets 1 of 1

Implications/ Relevance

Collaboration, dedication and perseverance has been the key to the success of the project; Lean Methodologies provided the framework. Through automation, overtime hours have been reduced and increase in patient contact by the financial counselor. Populytics created specific OACC financial reports including comprehensive details required as source data for the OACC Medicare Cost report. These monthly reports are utilized by administration in the budgeting and overall program decision making process.

Findings/ Conclusions

The lean principles provided the structured approach to accomplish this daunting task. It was the collaboration and commitment of the team member's determination to accomplish the charter mission. The challenges of staff transitions, technology support, and available time were conquered to decrease the manual data entry of fourteen spreadsheet logs down to five. The financial counselor is now able to devote her time to patient care and overtime was eliminated. Our Electronic Medical Record (EMR) network transition has been a challenge to complete our automation tasks, however full transplant EMR conversion is planned for 2016 with subsequent interfaces. The timeline below demonstrates the transition from a manual data entry to an automated process with the assistance of the Populytics providing the claims processing, adjudication and report writing.

2012 Kaizen Event

- 14 manual logs
- 219 data points
- Manual billing
- 8 hrs. OT/week
- Inaccurate patient registration
- Same workflow since 1991

2013

- 8 manual logs
- 153 data points
- 1 log eliminated
- 5 logs automated in finance department
- OACC "benefit" plan developed

2014

- 7 manual logs
- 72 data points
- 3 logs automated
- OACC "benefit" plan rolled out
- OACC manual vs. automated processing tesetd and verified

2015

- 5 manual logs
- 54 data points
- 2 logs automated
- New EMR imiplementation
- 1/1/16 Medicare Fee Schedule implementation.

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