NIATx-SI Business Practices for the Future

New Jersey Learning Collaborative

The NIATx Way

- NIATx implements a model of process improvement specifically for behavioral health care settings to improve access and retention in treatment
- The process improvement model relies upon the following five principles to effect organizational change:
  - Understand and involve the customer
  - Fix key problems that keep the CEO awake at night
  - Pick a powerful change leader
  - Get ideas from outside the organization or field
  - Use rapid-cycle-testing to establish effective changes - Plan, Do, Study, Act

The NIATx Way

- Over thirty NJ addictions treatment providers participated in previous DMHAS NIATx learning collaboratives

- Through these collaboratives providers learned to implement the NIATx process improvement model to improve access and retention as well as make more efficient use of treatment capacity

Why Now?

- In the fall of 2012, DMHAS applied to become a "convener" of a NIATx-SI: Business Practices for the Future Learning Collaborative

- The goal of this Learning Collaborative is to help addiction treatment providers develop the capacity to bill third-party payers using the NIATx process improvement model

- The project offers training on the core components of implementing third-party billing systems, the common areas where billing systems function poorly, and improvement techniques that work

Why Now?

- DMHAS fee-for-service contracts include utilization performance targets in FY 2012
- DMHAS saw the Business Practices for the Future Learning Collaborative as an opportunity for fee-for-service agencies to apply the NIATx process improvement model to achieve these targets and to strengthen their position as DMHAS implements a managed behavioral health model for the purchase of Medicaid, Block Grant, and State funded services
- DMHAS invited addictions fee-for-service provider agencies to participate in the Collaborative to support the design and implement of change projects to enhance their capacity to participate in the changing healthcare environment

The Change Projects
Center for Prevention & Counseling

- **Project Goal:** To increase the amount of cash collected from clients who pay for treatment and/or those having copays

The Change Projects
Center for Prevention & Counseling

- **Why and how it was selected:** We chose this focus for two reasons. By reviewing the monthly summaries of cash collected and comparing it to the number of clients being seen, we identified that counselors were not collecting the copays and self-pay fees that were agreed upon. To complicate matters, we discovered that the amount clients were being asked to pay was a subjective decision being made by each counselor with his/her client, rather than it being an objective process.

The Change Projects
Center for Prevention & Counseling

- ## How it worked:

  - A walk-through was completed on February 1st by the Change Leader and two counselors. (Note: Our first walk-through was Nov, 2010)

  - Results of the walk-through were assessed in a Quality Assurance Clinical Committee meeting using the NIATx mapping process.

  - Strengths were identified, including counselor's ability to engage with clients and that we have a welcoming staff.

  - Several challenges were identified, including lack of clear directions, housekeeping issues in waiting area and ambiguous financial policies and agreements. It was decided that the first NIATx aim would be to create and implement a standardized fee schedule.

  - A fee schedule based on Federal poverty guidelines was created. Staff was trained on the new procedure and it was implemented on April 1st with new clients and May 1st with current clients.

The Change Projects
Center for Prevention & Counseling

- **Project outcomes or results:**
  - After comparing the amount of cash received from copays and self-pays from May 1-14 to the amount received during our two week baseline period, we discovered that we had not substantially increased our revenue. Further examination revealed that clients who had been in treatment with us and had been paying a $20 copay were now paying only $5. At our most recent Quality Assurance meeting our team decided to revamp our fee schedule and implement an updated fee schedule for new clients on June 1st. Although we were disappointed that our revenue didn't increase as we had hoped, we view this as merely part of the process.
  - After the walk-through indicated problems in our waiting area, we instituted a client survey for a two week period to better assess the issue. The feedback from the surveys was very helpful (mostly positive!) and 15 clients volunteered to be part of an on-going effort designed to improve client services.
  - Among the benefits we identified were that counselors have become more comfortable asking for payment and that how we view our treatment services is changing from needing to serve everyone regardless of ability to pay to proudly providing a valuable service that has a reasonable and fair fee attached to it.

The Change Projects
Center for Prevention & Counseling

- **Lessons learned:**
  - Our staff likes to identify multiple problems and solve them all at once but now recognizes the benefits of adhering to the NIATx process. The "airplane" exercise helped us get to this place.
  - There is cohesiveness and a complementary vision between and among clinical, fiscal and administrative staff.
  - We can change our treatment philosophy to encompass the belief that collecting payment is appropriate and builds client accountability while also strengthening the agency.
  - The NIATx process is time-intensive and takes away from other important tasks and duties, but it is well worth it.
  - We are learning how to problem solve more effectively.
  - Having a mentor (David) has been incredibly helpful. We strongly encourage those interested in pursuing NIATx as a quality improvement tool to get support from those that have been through the process and believe in it.
  - We know we have a lot more to do and look forward to doing it!

The Change Projects
Hope House

- **Project Goal:** Increase Fee-For-Service revenue through improved agency processes and increased knowledge of clinical and billing practices.

The Change Projects
Hope House

- **Why and how it was selected:**
  - This project goal was selected due to the need for Hope House to supplement government funding sources, that are not guaranteed in the future, in order for programs to remain financially viable. In order to do that, efficient management of our fee-for-service opportunities and revenue were reviewed and difficulties with utilization rate were discovered. These two items highlighted the apparent need for both clinical and billing staff to work more effectively and efficiently together as it related to communication, understanding the impact of the functions of one area on the other and how the two areas needed to work together towards this common goal.

The Change Projects
Hope House

- ## How it worked
  - A weekly workgroup was convened to explore and outline agency processes and procedures.
  - Flow charts have been developed so that processes can be consistent throughout the agency and so all staff know the processes and expectations.
  - Agency terminology has been defined so that everyone is "speaking the same language"
  - Forms have been redesigned to reflect the standardized language and to capture necessary information in an efficient and user friendly way so that errors are minimized.
  - Responsibilities of each roll in the agency are being reviewed and the interface between different rolls is being discussed to help all areas understand the functions of the other areas and how they need to work together, seamlessly .
  - Exploration of clinical service delivery so that the most appropriate authorization can be requested for the client to insure improved utilization management. Currently, this is the step being focused on.

The Change Projects
Hope House

- **Project outcomes or results**
  - Improved communication among staff members in different areas due to decreased frustration in not "speaking the same language"
  - Improved resource stewardship due to streamlined processes, staff members better understanding their responsibilities, and awareness of who can support them if a question or problem arises.
  - Improved management of client authorizations and communication between staff members regarding this matter so that billing and authorizations can be requested timely

The Change Projects
Hope House

- **Lessons learned**
  - All staff members, regardless of discipline or department, are important in the fiscal responsibilities of the agencies. A shift is occurring from departments (billing, clinical) operating in silos and not wanting to have knowledge of the other area to a climate of all staff members having at least a general understanding of all areas of the services provided.
  - Understanding that fiscal responsibility and quality service delivery do not need to be mutually exclusive.

The Change Projects
Somerset Treatment Services

- Ensure prequalification of Medicaid eligibility to prevent denials (or refer clients to other funding sources)

- Developed centralized Medicaid verification to ensure accuracy

- Developed flowchart of Medicaid billing steps

- Results: 100% of clients with Medicaid were prequalified prior to entering treatment (all other clients were admitted under other funding sources)- process adopted

The Change Projects
Somerset Treatment Services

- Identify top three reasons for Medicaid denials and rebill

- Increased review of denials by clinical and administrative staff

- Better defined follow-up on denials and liaison between clinical and administrative personnel working on these issues

- Results: pending but some reasons for denials have been identified

The Change Projects
Somerset Treatment Services

- **Lessons Learned**
  - Coordination between clinical and administrative staff is key
  - Centralization of key billing functions is essential
  - Engagement and training for all staff and board members is important
  - Agency revenue can be increased by focusing upon issues in the billing process
  - Bringing different disciplines together (e.g., billing and clinical) can enhance the problem-solving process
  - Collaboration between different disciplines can build buy-in toward future business goals

Benefits of Participation

- Providers need to prepare for and adapt to significant impending changes
- NIATx provides a framework for evaluating provider's current status and developing a concrete plan
- Clinical staff are encouraged to interact with fiscal staff and rethink business practices
- Using this approach affords providers an opportunity to start taking action

What Can My Agency Do Now?

- Complete an agency self-assessment of billing practices

- Identify areas to address in billing practices

- Develop the business aspect of strategic planning for your agency

- Begin to integrate clinical and billing teams to develop solutions to identified problem areas