



Garrett County Health Department- Reproductive Health Sustainability Project

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Objective: Provide an overview of the GCHD Reproductive Program and our sustainability efforts.

Who are we?

Personal Health Staff

- 10 full time staff
 - Director/clinician
 - 6 nurses
 - 3 secretaries

What are we responsible for in PH?

- **Reproductive Health** (Family Planning & Sexually Transmitted Infection Programs)
- **BCCP** (Breast & Cervical Cancer Program)
- **CPEST** (Cancer Prevention Education Screening Testing)
- **Maryland Cancer Treatment Grants**
- **Communicable Disease**
- **Emergency Preparedness**
- **ACCU** (Administrative Care Coordination Unit)
- **Adult & Child Immunizations**
- **Ryan White**
- **Lead Case Management**
- **School Health**
- **Birth Certificates for Home Births**
- **Etc.....**



Combined clinic: STI & FP

FY	Oakland	Grantsville	College	STI	Total
2011					
Duplicated	1031	125	32	135	1323
Unduplicated	574	88	22	95	779
2012					
Duplicated	1218	93	58	194	1563
Unduplicated	676	80	38	135	929
2013					
Duplicated	1086	149	63	125	1423
Unduplicated	599	92	45	99	835
2014					
Duplicated	786	113	40	98	1037
Unduplicated	471	75	27	76	649

Culture, Attitude, Belief

- Started moving from Public Health Model to Business Model
- Initially around 2004—free services for most
- With Time – Everyone is billed and a sliding fee scale is applied
- Get more bang for your buck – set up an EBAY account
- Respect the non-chargeable list ☹
 - Considering a waiver for STI DX & TX < 21 years of age

Training

- Lean Government/Lean thinking
- Clinic Flow Analysis
- Sustainability Training –first through FP & then through STI program
 - 2012 in Family Planning Program
 - 2013 in Sexually Transmitted Infection Program

Lean Thinking/Government Training

- 5 day training for the entire health department
- Reviewed billing process
- Work smarter not harder
- All task completed has to be client focused
- Was told to start over

Lean Thinking/Government Training

Activities Implemented:

- Check in process changed
- Restocking supplies & brochures
- Ordering supplies
- Switchboard
- Standard Work

Restocking, ordering, organization



Clinic Flow Analysis

- The client should not wait for services
 - ❑ Dispense Medication and provide to client prior to filling out laboratory requisitions & documentation
 - ❑ The client is with the nurse while the secretary is finishing the check in process
 - ❑ The exam rooms should be stocked with all necessary supplies, should not be leaving the room to obtain items

Task Implemented after Reviewing the Data

- Number of appointments increased per day, schedule at least 24-26 clients per day for the clinician
- Work 12:00-1:00 (we work through the client's typical lunch break)
- Monitor # appointment canceled & ask why
- No Shows- why?, were reminder calls made, reschedule, type of visits, age
- Getting ready to expand hours

AM Huddle-Communication

- Every morning
- Last 5 minutes, no longer than 15

What are we doing that day:

1. Staffing for clinic including back up nurse?
2. Staff that are off or at meetings.
3. How we are taking lunch to ensure clinic covered?
4. Who is mailing specimens?
5. Do we have the charts prepped and ready?
6. Who is completing the AM billing report?
7. Updates and discussion

AM Clinic/Billing Report

- Completed every morning
- Review schedule & walk in client registry
- Make sure that every client has a service entered
- Ensure that insurance information, CPT, ICD-9 codes are correct

CLEAN CLAIM
From the Beginning

Enroll client into insurance program

- Assess household and client income at each visit
- Complete Family Planning Medical Assistance applications and fax for all eligible client's
- Have an assistor in the department – enroll in Medical Assistance
- Have a navigator in the department – enroll in Qualified Health Plan
- Hold bill if the insurance will back date

Updated Encounter form

- Constant monitoring for updates of CPT codes
- ICD-9 codes update in October
- Updated last September 2013
- Updating at the present time

Updated Registration Form

- Accurate information:
 1. Wrong address, can't send the self pay bills
 2. Wrong age, possibly claim denied because billed incorrect CPT code
 3. Household income-assign a sliding fee
 4. Percentage of Federal Poverty Level – eligible for Medical Assistance, Family Planning MA, etc.
 5. Working toward electronic version using topaz signature pads

Miscellaneous

- Nexplanon Process-pre-authorizations
- Process to bill claims that were held because insurance or medical assistance applications submitted
- Working through process for pre-authorizations versus referrals for STI services
- Identify person that negotiates contracts
- Identify the person that maintains contracts

Areas that needed improved upon

- AM Clinic/Billing report
- Holding claims for insurance enrollment (FP MA, MCHIP)
- Update Encounter form – ICD-9 & CPT codes
- Update Registration form-revisiting again
- Scheduled to review billing process from check in to bill submission with the key players
- Aging Report
- Dedicated billing staff

Take home message

- Get started ASAP
- Set a goal that is realistic
- Breakdown task into achievable goals
- Share the wealth and do this together as a team
- If we did it and are continuing anyone else can also achieve some degree of success
- Believe in yourself and your programs
- If you don't have funding you may not have a program-change your mind set