

The logo features a large, stylized red graphic element on the left side, resembling a thick, L-shaped bar. The year '2018' is written vertically in light blue text within the vertical part of this bar. To the right of the bar, the word 'NATIONAL' is written in light blue, uppercase letters. Below 'NATIONAL', the name 'RYAN WHITE' is written in large, bold, white, uppercase letters. Underneath 'RYAN WHITE', the text 'CONFERENCE ON HIV CARE & TREATMENT' is written in light blue, uppercase letters. The entire logo is set against a dark blue background with a vertical red bar on the far left and a horizontal red bar at the bottom.

2018 NATIONAL
RYAN WHITE
CONFERENCE ON HIV CARE & TREATMENT

Emerging Issues, Part A & B Resource Trends, and Using RWHAP Funds Efficiently by Saving Time and Money

Session ID: 11047

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Today's Agenda

- Introduction
- Where did we come from?
- Where are we today?- **Electronic, Automated End-to-End Billing System!**
- Future goals and vision
- Wrap up

Learning Objectives

- Learn about programmatic and infrastructure supports needed to design and implement automated, end-to-end eligibility determination and claims processing
- Explore the use of information technology to reduce manual effort to save time and costs
- Understand how to assess data quality and consistency issues that directly impact fiscal workflow and implement this kind of assessment in their own programs
- Presenters will provide guidance on pitfalls and lessons learned on how to avoid them to those regions interested in replication

Background

- The Tampa-St. Petersburg Eligible Metropolitan Area (EMA) is located on the west central coast of Florida, and is comprised of Hernando, Hillsborough, Pasco, and Pinellas Counties. Since 1992, the Hillsborough County Board of County Commissioners has been the designated Recipient and CEO of the Ryan White Part A funds for the EMA. The Board of County Commissioners delegate responsibility for the administration of the Part A funds to the Ryan White Program Office, which is a division of the Department of Health Care Services, within the Human Services Division of Hillsborough County Government.
- All of the positions directly funded by Ryan White Part A are housed within the Department of Health Care Services at the Hillsborough County Center building, which contains all major offices of Hillsborough County Government. These positions report directly to the Director of Health Care Services. This arrangement promotes a natural communication flow that is efficient and ongoing between RW staff and HC staff that is funded by Ryan White Part A and avoids duplication of effort.

Background

- General business process involves eligibility and services are entered in one system and then the services are submitted as claims to a third party administrator (TPA) for claims adjudication
- A County data warehouse contains eligibility and claims data for reporting and reconciliation

Challenges

Previously used cumbersome processes

- Legacy System for service entry, Notice Of Eligibility's (NOE's) and supporting documentation for RSR
- Legacy System provided an exportable report with the data fields required for billing but Sub-recipients separately submitted their claims manually through paper-based Health Insurance Claim Forms (CMS 1500 forms). Each CMS 1500 form came with multiple costs - purchase of the forms and shipping fees
- **Shared system** for two funding sources with different billing processes
- The claims process through the CMS 1500 forms was time-consuming, less secure because claims were mailed to TPA, prone to error and required manual creation (extra staff time)

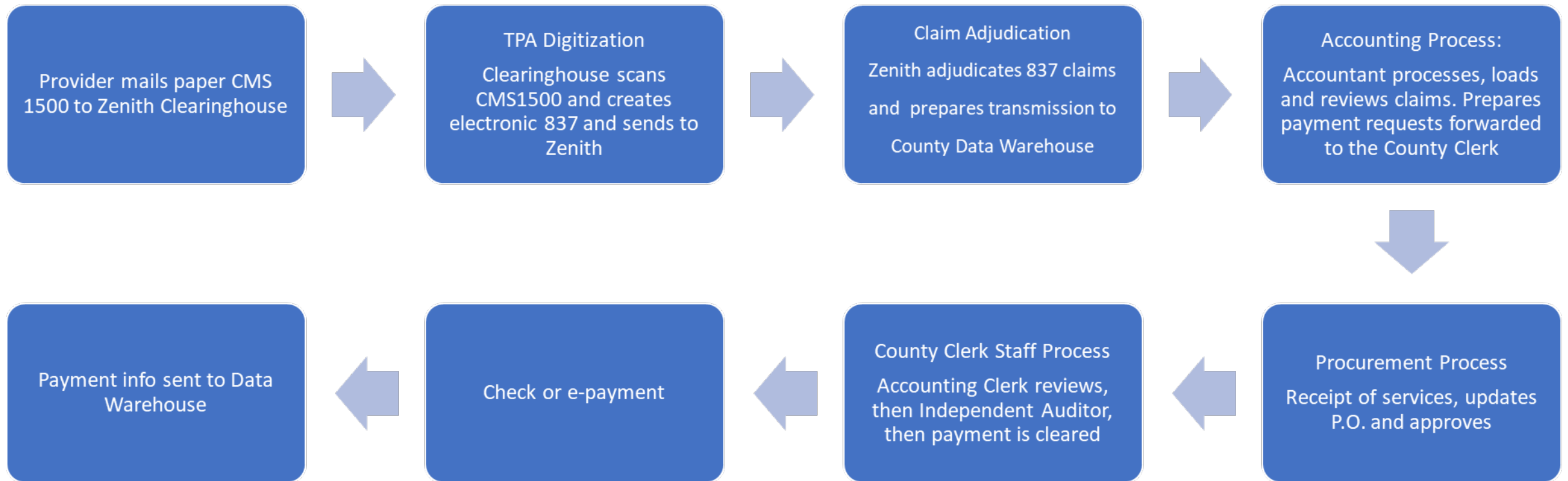
Challenges

- Paper claims were mailed to the TPA clearinghouse, scanned into an 837 format and sent to TPA for adjudication. Clearinghouse mailing locations changed twice within a year. The sites were located in Seattle and Minnesota.
- Scanning errors from paper claims: first letter/digit of diagnosis code cut off, decimal point not picked up in dollar amounts or partial units, poor quality paper claim results in incorrect identification of letters/numbers
- Electronic claims were auto **adjudicated at a 75.28% rate**. The claim turnaround time from date received by TPA to date processed was in five (5) or fewer days

Challenges

- Logic to provide a non overlapping eligibility file to TPA from legacy system and e2Hillsborough
- Cumbersome manual reconciliation process between the legacy system claims export file and TPA claims processed

Billing/Claims Process in the EMA (Before)



User Challenges Summarized

- Inefficient manual claims process
- Expensive for sub-recipients (duplication of client consent and eligibility, billing forms and shipping charges, time and effort)
- An average of 5 days and at most 3 staff members to submit paper claims each month
- Lack of efficient tools and support

II. Where are we today?

What Are Hillsborough County's Business Needs?

- Ryan White Data System compliance with HRSA standards and reporting
- Automated contract management, secure and electronic end-to-end billing system
- Automated eligibility determination to improve data consistency and data quality across all funded Part A sub-recipients
- Elimination of duplicate client files
- Global consent among EMA providers

Stakeholders

- Clients served and the whole Community
- Funded agency front-line staff
- Funded agency supervisors and administrators
- Recipient Program Staff: Ryan White
- Recipient Fiscal Staff
- Recipient IIO, Researchers and Evaluators
- Recipient Policy and Planning
- Recipient Administration
- Federal Funding Sources (HRSA)
- Grants Managers
- Quality Managers
- Department / Leadership
- Planning Groups (Planning Council, etc.)
- Zenith American Solutions -Third Party Administrator (TPA)

Innovative System Design and Features



Automated Client Eligibility Determination

- Automatic algorithm that calculates Eligibility dates based on triggers (some examples below):
 - Client Consent
 - NOE/Recertification
 - Income Verification
 - Federal Poverty Level (FPL)
 - Ethnicity/Race
 - Deceased
- Ryan White Eligibility Plans – established for determination of contract type/management and utilization of Part A funds category (formula/supplemental and MAI)
 - Ryan White Eligibility Plan:
 - Plan R (all services excluding Minority AIDS Initiative/MAI)
 - Plan RB (all services including MAI Black/African American)
 - Plan RH (all services including MAI Hispanic)
 - Plan RBH (all services including MAI Hispanic & Black/African American)
- Eligibility Audit Report – provides a list of all changes that may have affected a client’s eligibility and also provides eligibility history
- Document uploader (Identification, signed forms and etc.)

Client Entry and De-duplication

- Data Migration from legacy system – 6,800+ **clients**
- The system prompts duplicates – based on algorithm
- Intake Screen will display a “warning” prompt notifying of possible duplicate
- Service Entry is prevented until County staff is contacted
- Only County staff can resolve/merge duplicates

Service Entry and Claims/Billing

- Easy Submit Component
 - All eligible services captured are displayed for billing review
 - Approved services are selected and submitted
 - Submitted of services are sent to 837 module
 - 837 claims extract file generated every Monday evening
 - Sent to secure County folder for TPA file pick up
 - TPA picks up file and loads for claims review and adjudication
 - Final adjudicated file provided to County
 - Upload into County Data Warehouse, accounting staff process for payment
 - Payment and latest adjudication claims status available to sub-recipients in e2 automatically and electronically (currently in testing for implementation)

Claims/Billing Process in the EMA (fully automated and electronic)

- No more paper claims!
- Electronic claims fully integrated in e2Hillsborough
- Easy claims submission process
- Reduced manual time, cost and effort
- Efficient fiscal grant/contract management
 - Sub-recipient contract snapshot
 - Quarterly caps monitoring
 - Encumbered/billed/remaining balance amount
 - Current Procedural Terminology (CPT) coding integration– capturing client services provided during the office visits.

One Click RSR

- E2 RSR Data Dictionary – helps Providers understand the mappings between the RSR fields and data fields pulled from e2
- Errors, Warnings, and Alerts by Category
- Client drilldowns – report displays list of clients, all issues associated with the client record that can be corrected at one-go
- Completeness Report – follows HRSA’s manual and specifications. Gives sub-recipients a summary of data, in graphs and charts
- Exportable RSR
- Resources – Useful Links

• Errors, Warnings, and Alerts by Category

- **Errors** - Clients with errors must be resolved before exporting the RSR XML file from e2
- **Warnings** - It is encouraged providers fix these issues as well. If not, they must provide a justification to HRSA when they upload the RSR file to HRSA's site
- **Alerts** - it is encouraged that Providers resolve these as well. However, HRSA will not prevent providers from uploading the RSR if there are alerts.

The screenshot shows a web interface titled "Errors, Warnings, and Alerts by Category". At the top left, there is a dropdown menu set to "10 records per page". Below this is a table with the following entries:

Errors, Warnings, and Alerts by Category	Count
Warning: Clients missing viral load test results	1
Warning: Clients missing CD4 count test results	1
Warning: Clients missing a response to Prescribed ART	1

At the bottom left, it says "Showing 1 to 3 of 3 entries". At the bottom right, there are navigation buttons: "← Previous", "1", and "Next →".

Annotations include:

- A yellow box with the text: "This section will list all the HRSA errors, warnings and alerts that providers would see if they were to upload the RSR XML on the HRSA's EHB site." An arrow points from this box to the table header.
- Another yellow box with the text: "Search for eUCI or clients using this search feature." An arrow points from this box to the "Search:" input field.

Client Drilldowns

- Client drilldowns – report displays list of clients, all issues associated with the client record that can be corrected at one-go.

The screenshot displays a web interface for managing errors, warnings, and alerts. The top section, titled "Errors, Warnings, and Alerts by Category", shows a list of three warning categories, each with a count of 1. A yellow callout box points to the count column, stating: "Click on the number and system will display the client list at the bottom." Below this, a second yellow callout box points to the drilldown view, stating: "The system displays all the issues with the client record, not just the issue in question. This way, provider can fix all the issues at one-go." The drilldown view, titled "Clients Drilldown - Errors, Warnings, and Alerts by Category - Warning: Clients missing viral load test results", shows a table with columns for UCI, First Name, Last Name, and eUCI & Validation Messages. The table contains one entry for Jack Smith, with a "View" link next to his eUCI. The validation messages list three issues: "Clients missing viral load test results", "Clients missing a response to Prescribed ART", and "Clients missing CD4 count test results".

Errors, Warnings, and Alerts by Category

Errors, Warnings, and Alerts by Category	Count
Warning: Clients missing viral load test results	1
Warning: Clients missing CD4 count test results	1
Warning: Clients missing a response to Prescribed ART	1

Showing 1 to 3 of 3 entries

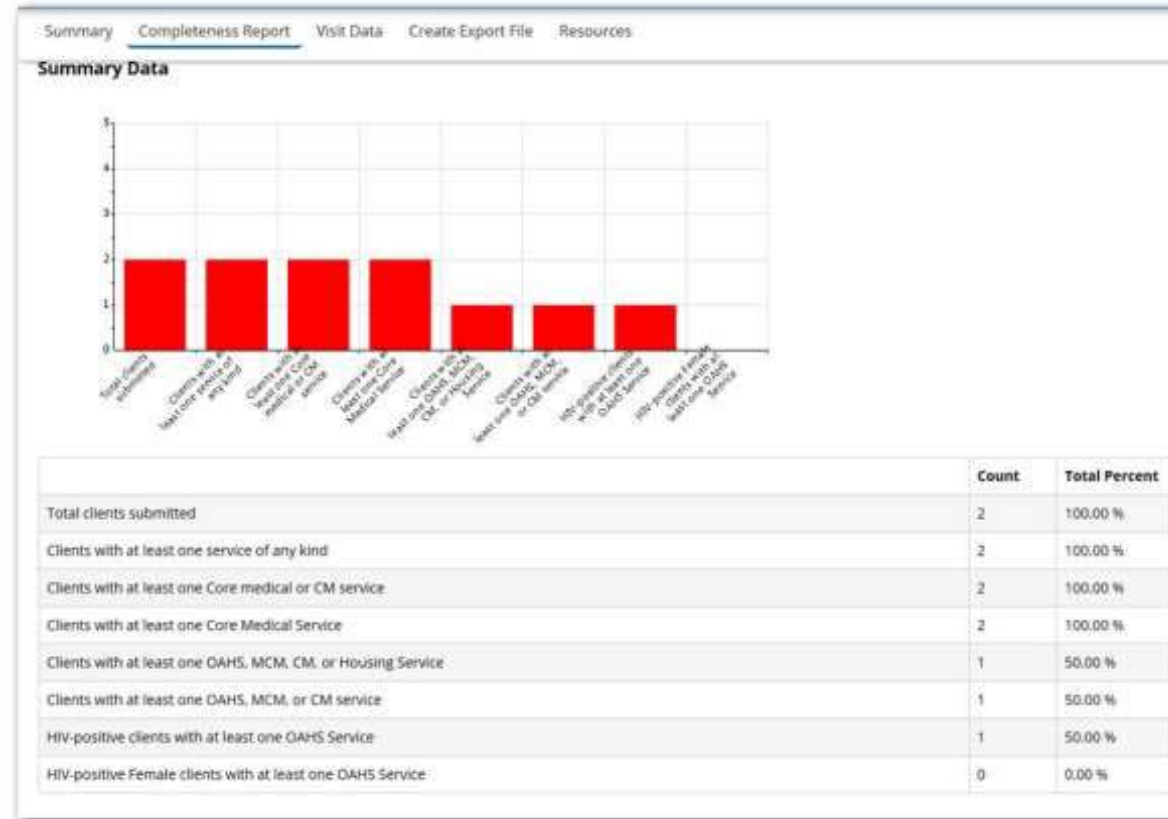
Clients Drilldown - Errors, Warnings, and Alerts by Category - Warning: Clients missing viral load test results

UCI	First Name	Last Name	eUCI & Validation Messages
JCSI0303883U	Jack	Smith	eUCI: F198BDE8FCDC2803827D6ABAF285EACAE4B1F9AU Validation Messages • Clients missing viral load test results • Clients missing a response to Prescribed ART • Clients missing CD4 count test results

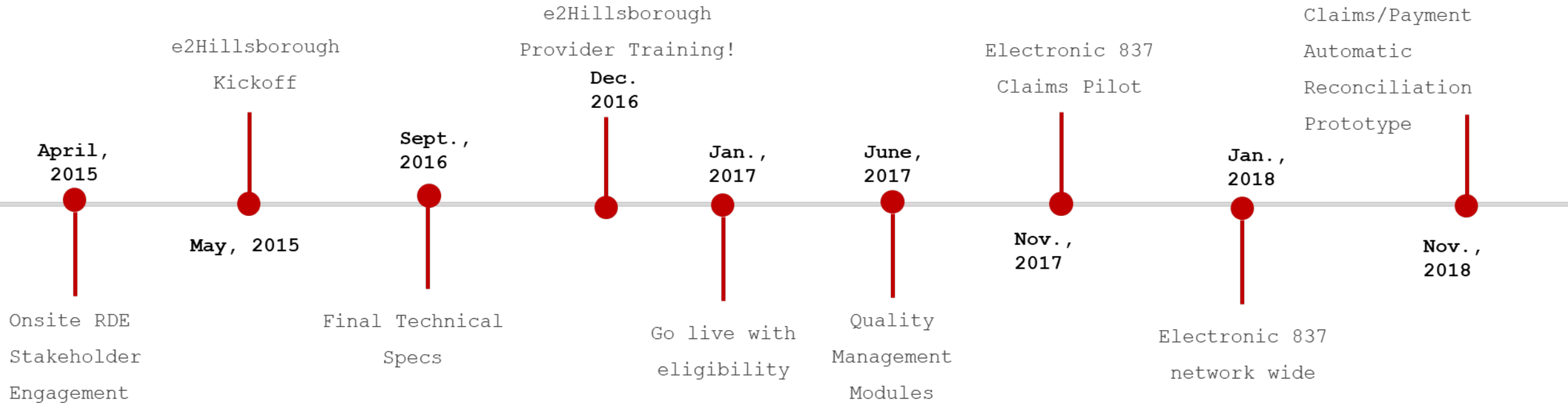
Showing 1 to 1 of 1 entries

Completeness Report

- Follows HRSA's manual and specifications. Gives sub-recipients a summary of data, in graphs and charts



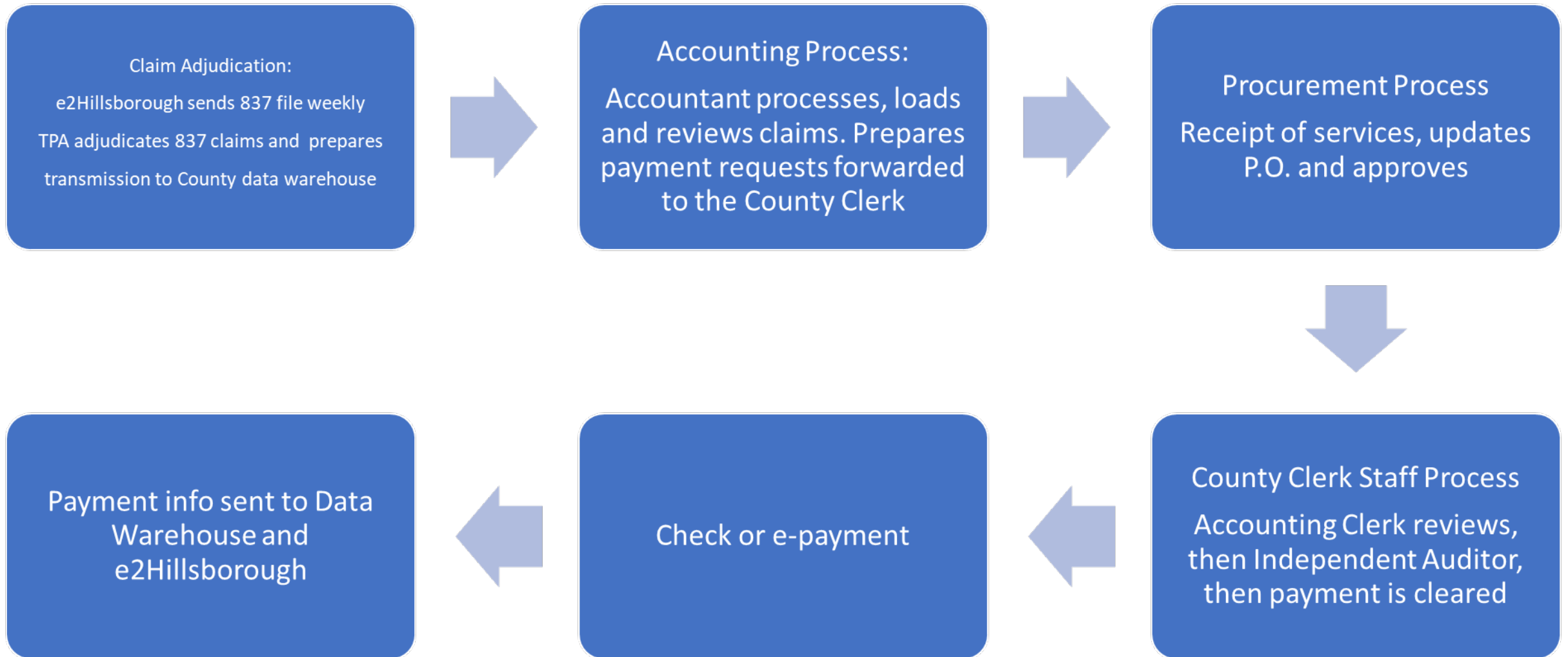
e2Hillsborough Timeline



e2Hillsborough System

- ✓ End-to-end Ryan White Services and Billing Database
 - ✓ CPT coding
 - ✓ 837 – Automated Electronic submissions
 - ✓ Claim status and reconciliation
- ✓ One-click RSR Reporting
- ✓ Client Eligibility (automated determination based on triggers)
- ✓ Global Consents across the EMA
- ✓ Data Sharing (limited)
- ✓ Contract/Grant Management
- ✓ Data Quality checks
- ✓ Partial Legacy Data Migration
- ✓ Two level data security and secure web hosting

Billing/Claims Process in the EMA (After)



Accomplishments!

- ✓ Automated electronic billing submissions. Completely paperless!
- ✓ Sub-recipient time, effort and cost savings
- ✓ Reduced claim denials
- ✓ Faster claim adjudication process – (98% auto adjudication)
- ✓ Faster claims processing and payment turn around time – (2 day avg. claim adjudication and 16 day avg. for sub-recipient to receive payment across the EMA)
- ✓ No client duplication!

Future Vision

- ✓ e2Hillsborough system enhancements and ongoing innovating strategies and reporting for efficiencies and cost savings
- ✓ EMR integration
- ✓ Eligibility integration with Part B, improve data consistency
- ✓ Data and visual analytics to assess utilization and fiscal trends to assist in planning and meeting goals of national HIV AIDS strategy

Lessons Learned

- This was a more complicated endeavor than originally anticipated.
- Team work and trust across multiple organizational units
- Required customization
- Have an IT design and specifications expert

ReCap

- Automated client eligibility determination
- Streamlined service (claim) submission
- Shared client information
- Improved RSR reporting

Wrap Up!



Thank you

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