

Affordable Care Act (ACA) Implementation

*Developing a Business Plan
Utilizing the IHS Template*

Format

- Presentation – 30 minutes or less
 - *IHS agency priorities*
 - *Expected outcomes*
 - *Brief overview of each section*
- Discussion – at least 30 minutes
 - *General questions*
 - *Obstacles faced to this point*
 - *Other lessons learned*
 - *Common versus unique variables*

IHS Agency Priorities

- To Renew and Strengthen our Partnership with Tribes
- In the Context of National Health Insurance Reform, to Bring Reform to IHS
- To Improve the Quality of and Access to Care
- To Make all of our Work Transparent, Accountable, Fair and Inclusive

IHS Priorities

Some Initial Thoughts

- Each of these priorities is associated with ACA implementation to some degree
- Perhaps the one with the greatest association – To Improve the Quality of and Access to Care
- Given my experience to this point, I would also recommend we carefully consider another as well – To Renew and Strengthen our Partnership with Tribes

A notable observation – the extent to which tribal leadership will choose to invest in/support tribally operated healthcare programs that demonstrate value.

Expected Outcomes

- Number of patients receiving services from IHS funded health care facilities remains stable or increases
- Third party collections remain stable or increase with each passing year
- Customer service and quality of care, as well as efficiency and effectiveness of the Indian Healthcare system, continues to improve over time

Ensuring Outcomes

Seven step process

1. Assess local environment

- *Designate a SME (subject matter expert) in clinic*
- *Potential competition – Examples:*
 - Services offered
 - Patient waiting times
 - Expanded hours – evenings and weekends
- *Identify critical partners and explore contracts*
- *Examine internal customer service levels*
 - Example – patient satisfaction

Ensuring Outcomes

Seven step process

2. Assess patient workload and impact on revenue

- *Determine your baselines*

 - Overall user population

 - Current third party active users

 - Current claims

 - Current collections

- *Establish growth potential based upon community demographics*

Ensuring Outcomes

Seven step process

3. Assess current staffing and workload levels, along with facility space, based on outcome of assessments, and develop strategies to handle possible changes in workload

- *Possible need to develop a facility plan – new vs. modification*
- *Enhance electronic capabilities (no paper!!)*
- *Reexamine patient flow processes*
 - Ex. - Utilize less expensive personnel
- *Recognize and implement best practices for efficiencies*
 - Examine utility of existing programs – accreditation and PCMH certification
- *Consider a series of staffing issues**

Ensuring Outcomes

Seven step process

3. Assess current staffing and workload levels, along with facility space, based on outcome of assessments, and develop strategies to handle possible changes in workload

Consider a series of staffing issues

Patient Benefit Coordinator

Certified Applications Counselor

6 hours of State training

Billers

Providers (May be essential if hours increased)

Finance staff (increased batching, reconciliations)

Patient registration

Address increased workload as new clients established

Improved efficiency for patient screening/data collection

Credentialing/privileging staff (may be required with

new contracts)

Ensuring Outcomes

Seven step process

4. Referrals and Authorization Process

- *Understand local contracts and pre-authorization requirements for direct care and specialist referrals*
- *Assess discharge and case coordination process*
- *Reevaluate CHS budgets as patient coverage increases via Exchanges or Medicaid expansion and **consider a higher prioritization of clinical preventive services***

Key point – in addition to improved quality of care, increased primary prevention is also a key strategy for one of the fundamental goals – decreasing the cost of health care (To be discussed in subsequent presentation)

Ensuring Outcomes

Seven step process

5. Eligibility Process for Medicaid Expansion and Exchanges

- *Careful and continuous review of future appointment rosters for third party payors – **maximize enrollment in alternate resources***
- *Make modifications in clinic procedures as necessary to ensure the agency is “payer of last resort” in all circumstances, including electronic application process capability*

Ensuring Outcomes

Seven step process

6. Assess Data Reporting Requirements

- *Bottom line – need to make certain that you continuously monitor changes in data reporting requirements, particularly as it relates to third party billing requirements*
- *Sources of data requirements will vary by clinic depending upon clinic relationships – CMS, IHS, State, County, other contractual agreements (Ex. – VA)*
- *Important – make certain your underlying infrastructure is modified/improved to ensure timely and appropriate management of data requirements*

Ensuring Outcomes

Seven step process

7. Marketing

- *Each site needs to develop a plan for your community that showcases the Indian Health Care system as an ideal medical home model*
- *It is felt this will be an essential component of our overall strategy to maintain and hopefully expand our current patient user populations*
- *Always emphasize our focus/priority on quality of care and customer service*
- *Approved ACA community education and outreach materials should always be utilized to ensure consistent and accurate information*
- *Internal and external plans should be developed**

Ensuring Outcomes

Seven step process

7. Marketing – External Plan*

- *Consumer Level Education**
- *Marketing Ourselves**
- *Tribe/Community**
- *Private Sector Contractors**

Ensuring Outcomes

Seven step process

7. Marketing – External Plan*

Consumer Level Education

Ensure all Native Americans are aware of the special benefits available to them via the ACA

Ensuring Outcomes

Seven step process

7. Marketing – External Plan*

Marketing Ourselves

Cultural competency

Customer satisfaction

Flexible hours and prompt service

Accreditation**

PCMH certification**

** IHS highly encourages the pursuit of accreditation and PCMH certification. At the same time, it is recognized that numerous clinics have been quite successful regarding customer satisfaction and business success without these accomplishments.

Ensuring Outcomes

Seven step process

7. Marketing – External Plan*

Tribe/Community

Tribal consultation on local business plan

Education regarding:

Agency priorities

Medical home model

Other IPC initiatives

Affordable Care Act benefits

Facilitate tribal/state communication

Routine web site updates

Consider use of social media

Ensuring Outcomes

Seven step process

7. Marketing – External Plan

Private Sector – Contractors and Medical Care Organizations

Referral processes

IHCIA requirements

Ensuring Outcomes

Seven step process

7. Marketing – Internal Plan

The top three issues:

Customer Service!

Customer Service!!

Customer Service!!!

Agency priorities updates

Internal improvements

Staffing

Resource management

Patient care improvement initiatives

Summary

- Know your local environment
- Develop a strategy that gives you a competitive edge
- Implement your business plan effectively
- Maintain vigilance and be prepared to change course

Appreciate Past Accomplishments



Prepare for the Future





Remain Mindful of the Past



Celebrate Recent Advancements



Prepare for the Future

