

Riley and Associates

ND Department of Health - PROtect ND Kids Immunization Project Status Report to Health and Human Services Committee August 5, 2010

Project Goals

- I. Develop an efficient LPHU business process for the PROtect ND Kids Program that encompasses procuring and managing vaccines as well as billing and collecting for these services;
- II. Analyze and enhance the financial performance of the Program among LPHUs so that services can be provided efficiently and cost effectively.

Deliverables

- I. Written evaluation of current LPHUs business processes and costs for delivering and administering the PROtect ND Kids Program
- II. Written Model for Improvement Plan – Process Mapping
- III. Conduct Quality Improvement Collaborative Conference(s) with involved LPHUs and ND Dept of Health leadership to solidify engagement and adoption of new directions for PROtect ND Kids Program

Process

- I. Select Four Pilot Sites
- II. Conduct Site Visits
- III. Review data
- IV. Develop Process Maps detailing current and future state map
- V. Develop and Review Alternative Approaches
- VI. Conduct Quality Improvement Collaborative – select/finalize recommendations
- VII. Share results and direction with appropriate stakeholders
- VIII. Implementation

Pilot Sites

- I. Central Valley Health District - Jamestown
- II. City County Health District - Valley City
- III. First District Health Unit - Minot
- IV. Walsh County Health District – Grafton

Partners

- I. Blue Cross Blue Shield of North Dakota - Fargo
- II. University of North Dakota School of Medicine and Health Sciences – Grand Forks

Four Areas of Focus

I. Financial Analysis

The following analysis is being conducted for each of the four pilot sites gathering information from the sites, BCBSND and UND.

- a. Volume and Revenue Analysis
- b. Cost Analysis
- c. Contribution Analysis

II. Vaccine Procurement and Management Review

a. Key Questions

- i. How do LPHUs order and manage vaccines?
- ii. What challenges do they face?
- iii. What are the costs associated with procuring and managing vaccines?
- iv. How could the process be improved?

b. Sample of Alternative Solutions for Consideration

- i. Develop more rigorous internal methods to procure and manage vaccines;
- ii. Appeal to funding sources to allow for more cost effective methods to be developed for procuring and managing vaccines;
- iii. Explore other approaches to securing vaccines including:
 - Regionalize vaccine procurement and management function among neighboring LPHUs
 - Purchase vaccines under federal contracts through the Universal Vaccine Program

III. Data Capture, Billing and A/R Management

a. Key Questions

Clinical/Patient Care

- i. In what settings do LPHUs provide childhood immunizations?
- ii. What are the clinical issues associated with providing childhood immunizations and how are they met?
- iii. What process is used when a series of vaccinations is required?
- iv. What clinical and administrative information do they provide to patient/parent?

Patient/Service information

- i. How are patients registered?
- ii. What is documented?
- iii. What types of forms are used to capture immunizations?
- iv. How is NDIIS updated?
- v. What other patient information systems or methods do LPHUs use?

Billing and A/R Management

- i. How are patients/payers billed?
- ii. What are the roles of the LPHU, BCBSND and UND?
- iii. Are different processes used depending on the payer?
- iv. How are receivables managed?
- v. What issues do you face with billing and managing receivables?

b. Sample of Alternative Solutions for Consideration

i. Related to Clinical/Patient Care

- Review process maps for clinical/patient care with pilot LPHUs to identify opportunities for improving service efficiency and effectiveness
- Develop best practices using Quality Improvement Collaborative

ii. Related to NDIIS

- Strengthen mandate for all North Dakota providers to utilize NDIIS when providing childhood immunizations;
- Increase efforts to enhance NDIIS capabilities
- Explore an external assessment of the NDIIS

iii. Related to Billing and Accounts Receivable Management

- Dedicate a team of LPHUs, BCBSND, UND, NDDoH to resolve challenges associated with the billing and A/R management
- Explore moving billing service to another provider
- Explore feasibility of NDDoH performing billing on behalf of LPHUs
- Enable each LPHU to perform its own billing and A/R function or contract with billing service provider
- Explore collaborative relationships among LPHUs to share billing and A/R management function
- Combination of above

IV. Information Systems

a. Key Questions

- i. What systems do LPHUs use to provide and manage childhood immunizations?
- ii. What major challenges do the LPHUs face with these systems?
- iii. What processes are used by LPHUs to maximize the efficient use of these systems? What can be learned from others?
- iv. What opportunities exist for sharing systems among LPHUs to enhance communication and program administration? How could this improve the delivery and administration of childhood immunizations?
- v. How open are the LPHUs to the potential of abandoning current systems and processes in favor of a universal system?
- vi. What are the cost implications?

b. Sample of Alternative Solutions for Consideration

i. NDIIS/THOR

- Work together to consider all options for improving compatibility of NDIIS with other patient information systems
- Explore how other states have established immunization registries and the possibility of an external assessment of the NDIIS

ii. LPHU Systems

- Encourage establishment of statewide patient information system by creating task force representing the different types of LPHUs and going through a deliberate RFI and RFP process for selecting a single system
- Allowing each LPHU to continue to select and purchase their own system according to their needs and which is compatible with the NDIIS
- Encourage regional partnerships among LPHUs to share systems
- Continue to allow smaller LPHUs to use manual registration and billing processes

Project Timeline

I. August 2010

- a. August 5th meeting with Health and Human Services Committee
- b. Complete preparation of current state process maps
- c. Assemble and Analyze Cost and Billing Data from LPHUs, BCBSND & UND
- d. Analyze various options particularly related to Vaccine Procurement and Management
- e. Continue analysis of findings and development of alternative solutions for data capture, billing and A/R management
- f. Late August First Steering Committee Quality Improvement Collaborative to review current and design desired Process Maps

II. September 2010

- a. Complete analysis of findings and development of alternative solutions for data capture, billing and A/R management
 - Share results with Steering Committee
- b. Conduct Second Steering Committee Quality Improvement Collaborative to develop plan for Vaccine Procurement and Management