

Project Title: QI Billing Team SCHD Quality Improvement Training, 2010-2011

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PLAN

Identify an opportunity and Plan for Improvement

1. Getting Started

Data entry errors and efficiency of billing process was identified as a possible area for improvement.

2. Assemble The Team

The Billing Project Team members were from 3 different Health Department Programs:

- Finance/Billing,
- Health Equity, and
- Children and Family Health.

AIM Statement

We seek to improve the efficiency in the billing process by reducing the most common data entry errors of incorrect/incomplete insurance information. Currently the billing department reports encountering an average of 45 insurance errors each month related to incorrect or incomplete information. This results in insurance denials, decreases reimbursement time and inefficient use of billing staff time. Insurance error rate can be reduced either by complete information being entered into the "Notes" section or by scanning the insurance card.

3. Examine the Current Approach

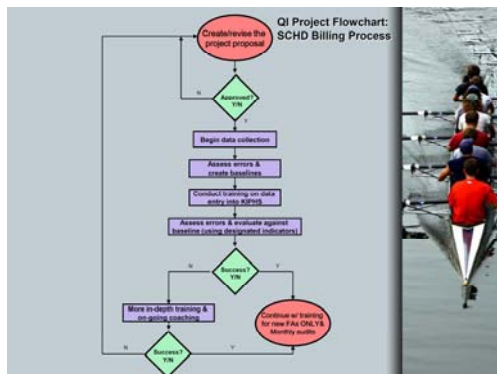
An informational meeting was conducted with the billing staff to determine the top billing errors. Top two errors identified: Incomplete and inaccurate insurance information entered into KIPHS. (see Cause and Effect Diagram)

Cause and Effect Diagram



4. Identify Potential Solutions

Providing training to FA's on required information to be entered into KIPHS or all insurance types.



5. Develop an Improvement Theory

If Fiscal Associates are provided training on the most common errors related to insurance data entry, related errors should decline. (See SIPOC Diagram)

SIPOC Diagram Suppliers/Inputs/Processes/Outputs/Customers

SUPPLIERS	INPUTS	PROCESS	OUTPUTS	CUSTOMERS
PH Division FAs Data Entry/Billing Policy KIPHS Database SCHD Billing Staff QI Billing Project Team Insurance Companies Patients	Reports of data entries Key informant interviews Data entry training session Database software upgrade	Identify opportunity for improvement Examine current billing process/policies Plan & implement interventions (training & IT upgrade) Analyze data Present Outcomes END	Formal FA data entry training curriculum Trend data of FA entry errors QI process for continuous monitoring and training of FAs	PH Division FAs QI Billing Project Team SCHD Billing Team

DO

Test the Theory for Improvement

6. Test the Theory

Gantt Chart

Task	Week of 10-18	Week of 10-25	Week of 11-1	Week of 11-8	Week of 11-15	Week of 11-22	Week of 11-29	Responsible
Complete Project Proposal	█							Team
Gather back up ins. Data	█	█						Lucretia/Burch
Analyze Insurance data per training		█	█					Lucretia/Burch
Train FAs			█	█				Dale/Crystal
Audit 1 month of no additional training				█	█			Lucretia/Dale/Crystal
Complete results					█	█		Lucretia/Burch/Bill
Present Story Board						█	█	Billing Team

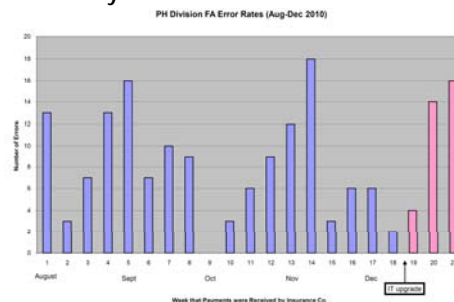
One training session occurred with Preventive Health and Healthy Babies Fiscal Associates in October of 2010 to review types of insurance and information needed for each field in Ph Clinic.

During discussion it was determined that an upgrade was needed to KIPHS to help reduce insurance entry error and PH initiated modification.

Study

Use Data to Study Results of the Test

7. Study the Results



We anticipate the error rates will decrease as of 2011. We will use the above graph as a base-line and will provide updated results graph after the 1st Quarter of 2011 (if applicable).

ACT

Standardize the Improvement and Establish Future Plans

8. Standardize the Improvement or Develop a New Theory

Based on the results of the study, the amended theory is as follows: Standardized training on insurance data entry along with the modifications made to PhClinic will result in a reduction of data entry errors related to missing or inaccurate insurance information. All data entry staff must receive the same training.

9. Establish Future Plans

New theory will be tested during the first quarter of 2011.