

July 26, 2012



OHLC Administrative Simplification

Oregon Healthcare Financial Management Association

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Oregon Health Leadership Council

- Commissioned by the business community in the summer 2008
- Goal—Develop solutions and actions to keep health care costs and premium increases closer to the CPI
- Incorporated spring 2010



Oregon Health Leadership Council

- ❑ Members: 30 representatives including physicians, hospital and health systems, and health plans

Oregon Health Authority ex-officio

- ❑ Board: 14 of those members serve on the governing Board
- ❑ Web site:
<http://www.orhealthleadershipcouncil.org>

How work is being accomplished

- ❑ OHLC membership leaders to review and support recommendations
- ❑ Four work groups with 200+ members
 - Value Based Benefits
 - Evidence Based Best Practice
 - Reimbursement & Payment Reform
 - Administration Simplification

Some recent accomplishments

- ❑ Evidence based best practices
 - ❑ Acute low back pain pilot launched
 - ❑ Reducing high cost imaging - success continues
 - ❑ Reducing elective deliveries prior to 39 weeks
 - ❑ High value patient centered care demonstration in 2nd year
- ❑ Value based benefit design continues to expand



Administrative Simplification

Administrative Simplification.....

Today's topic



Administrative Simplification: Structure

Four current projects, 120+ participants

Claims/eligibility

Prior authorization

EDI – electronic transactions

Credentialing



Administrative Simplification: Executive Committee

- Senior level staff appointed by OHLC
- Plan implementation of administrative simplification projects
- Recommend future projects
- Coordinate with State of Oregon administrative simplification activities
- Measure success



Claims/Eligibility work group: Single source authentication

- ❑ Use of single source authentication through OneHealthPort is expanding:
 - ❑ Over 13,500 users in 6400+ organizations
 - ❑ 14 months ending December 2011
 - 1.2 million transactions
 - ❑ 6 months ending June 2012
 - 1.5 million transactions
 - ❑ Work group serves as advisory group to OneHealthPort



Claims/Eligibility: Web site capabilities

- Recommended 75 payer web site best practices in 2010
- Providers evaluate sites and provide feedback to payers on regular basis
- Continual improvement of payer web site capabilities

Claims/Eligibility: Prior authorization

- Subcommittee formed to identify opportunities for simplification
- Evaluating Washington best practices and other states
- Gathering data from providers on current practices
- Gathering data on regulatory framework
- Goal is to submit recommendations by November 2012

Claims/Eligibility: Metrics

- ❑ Metrics developed to measure impact of all administrative simplification activities
- ❑ Claims/eligibility work group charged with gathering and charting data
 - ❑ Calls to payer call centers from providers
 - ❑ Logins to payer web pages (claims, benefits, eligibility)
 - ❑ 270/271 transactions (eligibility)
 - ❑ 837 transactions (claims)



Claims/Eligibility: Metrics

- Base line data gathered from 2010, 2011 (monthly and quarterly)
- Q1 and Q2 2012 data to be gathered in August 2012
- Graphics being refined to show change over time



EDI – electronic data transactions: Oregon Companion Guides

During 2011, Oregon Companion Guides were recommended and adopted by the State of Oregon for:

- 837 transactions (claims)
- 270/271 transactions (eligibility/benefits)



EDI – electronic data transactions: Oregon Companion Guides

During 2012:

- Proposed the Oregon Companion Guide for 276/277 transactions (claims status)
- Updated the 270/271 guide to reflect recent CORE released standards
- Began work on Oregon Companion Guide for 835 transactions (remittance advice)
- Working with provider groups to increase use of electronic transactions



Credentialing: Identifying major headaches

Credentialing in Oregon has many components which are duplicative and confusing!



Credentialing: Background

During 2010 and early 2011

The credentialing work group identified the highest standard for data that would meet the needs of all credentialing entities in Oregon and identified criteria for evaluating solutions



Credentialing: Current status

The OHLC determined that Medversant would be the preferred solution for Oregon

The OHLC charged the Executive Committee with monitoring the experience in Washington state, where Medversant is being implemented through OneHealthPort



Credentialing: Current status

Members of the Executive Committee have identified key questions by which to evaluate the Washington experience before making a final recommendation to the OHLC



Credentialing: Current status

A provider survey is being developed to get current information on provider experiences with credentialing and to determine how best to encourage adoption once a solution is implemented in Oregon



Your questions and input

Discussion