Enhanced Payer-Provider Communication

THE ROAD TO BETTER RELATIONSHIPS AND HOW TO OBTAIN OPTIMAL RESULTS ALONG THE WAY

Jennifer Bartlett

Infirmary Health

A Brief History

▶ Facilities around our state had experienced numerous years of ongoing struggles with a local Medicare Advantage plan

▶ Historically, this plan was based mostly in Alabama, then Texas, Mississippi and Florida. They are now a line of business operated by Cigna

▶ In 2016, this plan was brought under sanctions by CMS, which then disallowed the plan from signing on any new business during a two year period

▶ The plan was around third in rank for our current Medicare Advantage volume, with United and Humana being the largest volumes

The Road Trip Ahead

- There were numerous accounts lacking resolution to clinical appeals
- High rate of denials of admission
- Broken processes for obtaining determinations from the payer
- Inconsistent remittance codes
- Invalid contact information/faxes
- Ineffective payer communication resources
- Just entirely broken processes—every way we turned

The Road Map

▶ **Establish an internal contact/resource**

- ▶ In 2016 we were able to establish an open line of communication with the Network Administrator for this plan.

- ▶ If the payer answers and provides a singular contact, such as in our case, then do the same in return for the payer. This will cut down on confusion and will make the conversations more meaningful. This will also help to keep things from becoming second hand information. This will further eliminate the all-too-common "same question, three different answers from the payer" issue.

The Road Map
▶ MAKE THE PLAN

- ▶ Create a proposal for the payer/set a definite agenda

- ▶ What do you want to get out of the ongoing meetings?

- ▶ Can you categorize the issues for the payer? Give them a "bucket" list. Spreadsheet/Data) uniformity is key!

- ▶ Set a reasonable meeting goal. If at all possible, meet weekly at first. Then transition later to an agreeable maintenance schedule with your payer.

The Road Map

▶ SET THE COURSE

- ▶ Get the inventory for discussion into a payer friendly spreadsheet
  - ▶ Providers LOVE for information to readily identify the patient. You expect a remittance to tell you where to post the payment don't you? Well, the payers expect the same in return. Ensure that your common spreadsheets include helpful information for the payer, like their claim number, the member's contract number, DOB, etc.).
- ▶ Easy does it!
  - ▶ Try to get as many of the "easy fixes" out of the way first (i.e., check your contract for any reference to an appeal response expectation by the payer)

The Road Map

- Most of your software/reporting packages should be able to pull some sort of query that will give you the basic information that you need for the payer friendly spreadsheet.

  - Ask for help from your IT department or your software vendor!

  - Ensure HIPAA compliance when shipping information back and forth in email (encrypt your data and provide a password to the payer).

Are We There Yet?

▶ **Don't expect perfection**

▶ **Assign reasonable take-aways**

▶ **Double check your arguments**

▶ **Agree to disagree**

▶ **Creative collaboration**

Are We There Yet?

▶ **Compare notes with colleagues in your state**

  ▶ **Quarterly meetings are held in our state and sponsored by our Hospital Association**

  ▶ **Payers attend the meetings**

    ▶ Questions are solicited from providers around the state on a quarterly basis

    ▶ A steering committee compiles the questions and meets to discuss them

    ▶ Questions are sent out to the payers several weeks ahead of the statewide meeting

    ▶ If you are having an issue, your neighboring facilities are most likely having the same issues

Reaching The Destination

▶ The payer from the discussion today has emerged from being in two years of sanctions by CMS and being one of the lowest rated in the state (for provider-friendliness) to being one of the higher rated in provider relations

▶ We will never agree 100% on every issue. We still agree to disagree on plenty of issues

▶ We will never be devoid of topics to discuss and issues to solve

▶ The continual feedback from our facilities, as well as others in our state have allowed the payer to not only learn from past mistakes, but to posture themselves to be collaborative and effect extremely positive changes in the payer-provider culture