

Indian Health Service

PBC Roundtable Best practices

PRESENTER NAME NAUNI CASTRO

TITLE LAWTON WHAT WORKS BEST

DATE 8-24-23



PATIENT SCREENINGS

Reaching the Patient

Walk-Ins (No patient turned away)

Calls (Try every number in chart)

Letters

Put note in scheduler on patient's appointment to send to PBC.

Talk to patient while waiting for appointment.

Patients sent from Registration, Clinic Staff, Case Management, Pharmacy.

Public Health Nurse (Wellness Check)

Home Visit

Alternate Resources

Per Chapter 7 of Revenue Operations Manual:

“The Benefit Coordinator identifies patients who are eligible for alternate resources such as Medicaid, Medicare, VA, ACA Exchanges, Private Insurance and others.”

Others:

Crime Victims, Open accidental liability cases, Disability, State Funds for Breast Cancer dx/prevention, ESRD/American Kidney Fund, Ryan White Foundation (HIV).

Enrollments

ONLINE PORTALS

(Works Best! Paperless, quicker, confirmation)

- SSA/Retirement/Disability/Medicare/Extra Help
- Medicaid
- Oklahoma State DHS Online Portal
 - Food stamps
 - Aged, Blind, Disabled Benefits
 - Medicare Savings Programs

PAPER APPLICATIONS

(Convenient for mailing, taking to events, use to reach patients in different parts of facility, when computers not working)

- Social Security/SSI/Disability Forms
- Medicaid Application
- ACA application
- DHS application
 - Food stamps
 - Aged, Blind, Disabled Benefits
 - Medicare Savings Programs

PBC Best Practices after patient has coverage...

Real-time documentation (pg 4 insurance, pg 5 PBC case, pg 8 patient detail, EHR)

- Affects billing (timely filing limits)
- Affects Purchased Referred Care Referrals, Case Managers (continuation of care)
- Prevents other PBC doing unnecessary double work

PBCs entering insurance correctly and address coordination of benefit issues with patient.

- Prevents future denials in Accounts Receivable or Billing rejections.
- Problems we currently address are ACA & Medicaid dual coverage.

PHARMACY

Work closely with Outpatient Pharmacists and Reimbursement Pharmacists.

List of uninsured patients obtaining monthly high priced drugs for screening.

PATIENT ASSISTANCE PROGRAMS AND NON-FORMULARY CONSULTS

- Screen patients for alternate resources
- If qualify for coverage, notify pharmacy to check reimbursement. (May need to submit PAP app if med is not covered under plan formulary.)
- If patient has future effective date, ask pharmacy to provide patient an intermittent supply of medication, if possible.
- Patient's eligible for Extra Help program..have pharmacy use LINET (Limited Income Newly Eligible Transition program)
- No coverage, submit a Patient Assistance Program application to pharmaceutical company. Some companies offer online provider portals for application status.

KEEPING UP WITH TRAINING

CERTIFIED APPLICATION COUNSELOR TRAINING

STATE MEDICARE ASSISTANCE PROGRAM/SENIOR HEALTH INSURANCE COUNSELING PROGRAM

SSI/SSDI OUTREACH, ACCESS, AND RECOVERY (SOAR) TRAINING

SSA BENEFIT TRAINING

*IF TRAINING WAS NOT AVAILABLE, COLLABORATE WITH AGENCIES TO IMPLEMENT TRAINING NEEDED.

(Credit to PBC/Mat Bisbee collaboration on: SSA Summit, Disability, ACA trainings, VA referrals/VMBP) Also offered to other departments such as PRC, nurse case managers, revenue cycle.

*Good rapport with state agencies/SSA/VA/surrounding tribes. They provide services to our patients and they also refer patients to PBCS.

OUTREACH

VA ENROLLMENT EVENTS (PACT ACT): last event, July '23, serviced 148 veterans, dependents, survivors with multiple tribal affiliations.

MIPPA EVENTS: Attend & educate elders on Medicare/SSA/State benefits at surrounding county tribal elderly centers and complexes.

BACK-TO-SCHOOL EVENTS: Medicaid enrollments, Medicaid Unwinding.

DISABILITY AWARENESS EVENTS

TRIBAL HEALTH FAIRS: speakers and booth

BI-WEEKLY ACA ENROLLMENT EVENTS W/BCBS OK

HOSPITAL BENEFIT FAIR (Pre-Covid): 30+ vendors for information & enrollment)

