



The Council of State Governments
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2011 Innovations Awards Application

DEADLINE: MARCH 28, 2011

ID # (assigned by CSG): 2011- _____

Please provide the following information, adding space as necessary:

State: Missouri

Assign Program Category (applicant): Health and Human Services (Use list at end of application)

1. Program Name:

Special Health Care Needs (SHCN) Claims Processing Unit

2. Administering Agency:

Department of Health and Senior Services (DHSS)/Division of Community and Public Health (DCPH)/Section for Healthy Families and Youth (HFY)/Bureau of Special Health Care Needs (SHCN)

3. Contact Person (Name and Title):

Gary Harbison, SHCN Bureau Chief

4. Address:

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Gary.Harbison@health.mo.gov

8. Web site Address:

<http://health.mo.gov/living/families/shcn/index.php>

9. Please provide a two-sentence description of the program.

SHCN has two Programs, Adult Head Injury (AHI) and Children and Youth with Special Health Care Needs (CYSHCN), that provide funding for health and support services. The SHCN Claims Processing Unit is responsible for all aspects of claims management, (approximately 7,000 claims annually) for both Programs.

10. How long has this program been operational (month and year)? Note: the program must be between 9 months and 5 years old on March 28, 2011 to be considered.

3 years (January 2008)

11. Why was the program created? What problem[s] or issue[s] was it designed to address?

The SHCN Claims Processing Unit was created as a direct result of the claims processing responsibilities transitioning from Office of Financial and Budget Services (OFABS) to SHCN. Reassigning these duties to SHCN staff members who are more familiar with SHCN Programs allowed for complete evaluation of the claims processing system. As a result, the SHCN Claims Processing Unit was able to identify and rectify areas of inefficiency and inaccuracy with which SHCN claims were being processed.

12. Describe the specific activities and operations of the program in chronological order.

Once the claims processing responsibilities were fully transitioned to the SHCN Claims Processing Unit, the renovation began at ground level with clarifying Program policies regarding medical necessity, funded services and prior authorization of funds. Next, the entire claims process was broken down step by step and redefined, including the assignment of distinct reimbursement categories and rates. Then, a claims tracking database was created to serve as an internal checklist as well as to justify each claims adjudication; thus making it easier for claims staff to answer provider and/or management questions. Lastly, continual training for claims processing staff was implemented to ensure continued proficiency.

13. Why is the program a new and creative approach or method?

Each Bureau Program is unique and complex. In order to achieve and maintain maximum claims processing efficiency and accuracy, staff must be knowledgeable about the SHCN Programs. Shifting claims processing responsibilities from a separate entity to SHCN staff has allowed for the development of a clear and defined association between claims processing and Program policy.

14. What were the program's start-up costs? (Provide details about specific purchases for this program, staffing needs and other financial expenditures, as well as existing materials, technology and staff already in place.)

There were no start-up costs incurred. Claims adjudication responsibilities were assigned to existing SHCN staff in addition to their regular job duties. Therefore, no additional staff, equipment or materials were required.

15. What are the program's annual operational costs?

SHCN incurs no additional annual costs. The Claims Processing Unit functions have been incorporated into the regular day to day operations of SHCN.

16. How is the program funded?

SHCN is funded by state and federal dollars including Maternal and Child Health Services Title V Block Grant, General Revenue, Donations and Memorials.

17. Did this program require the passage of legislation, executive order or regulations? If YES, please indicate the citation number.

No.

18. What equipment, technology and software are used to operate and administer this program?

Fax, phone, computer, MOHSAIC (Missouri Health Strategic Architectures & Information Cooperative) information system. There is not special software required for claims processing; however, SHCN is in the process of migrating MOHSAIC to a web-based system that will allow for electronic submission and processing of claims, thus, further improving efficiency.

19. To the best of your knowledge, did this program originate in your state? If YES, please indicate the innovator's name, present address, telephone number and e-mail address.

N/A

20. Are you aware of similar programs in other states? If YES, which ones and how does this program differ?

N/A

21. Has the program been fully implemented? If NO, what actions remain to be taken?

No. Full development of the web-based MOHSAIC system has not been completed. Once this has been completed, providers will be able to submit claims, as well as track processing and payment, electronically.

22. Briefly evaluate (pro and con) the program's effectiveness in addressing the defined problem[s] or issue[s]. Provide tangible examples.

More efficient use of Program dollars: Program spending associated to direct services for years prior to 2008, show a significant and steady rise. However, since the claims processing renovation was implemented in 2008, Program spending has remained level. This stands in stark contrast to an estimated 7% annual increase in health care costs for special health care needs populations.

Reduction of turn-around time for claims: Claims are logged into the MOHSAIC system, indicating a received date and a processed (warrant) date. Currently, SHCN claims are processed for payment within 7 - 10 business days of receipt. Prior to the claims process renovation, these processing times were much lengthier and varied greatly.

Increased Provider Satisfaction: During the first six months of transition, claims processing staff received multiple calls from providers questioning why they had not yet received payment or why the claim was reimbursed the way it was. These calls have declined steadily over the past 12 months.

Increased Provider Network: The number of enrolled SHCN Providers has increased since 2008.

Increased Customer Satisfaction: The 2009 SHCN Participant Survey indicated over 90% of Program participants were satisfied or very satisfied with SHCN services.

23. How has the program grown and/or changed since its inception?

Through continual assessment and evaluation of the SHCN claims processing system, the team proactively identifies potential areas of enhancement and adjusts processes to increase efficiency.

24. What limitations or obstacles might other states expect to encounter if they attempt to adopt this program?

N/A.

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2011 Innovations Awards Application Program Categories and Subcategories

Use these as guidelines to determine the appropriate Program Category for your state's submission and list that program category on page one of this application. Choose only one.

Infrastructure and Economic Development

- Business/Commerce
- Economic Development
- Transportation

Government Operations and Technology

- Administration
- Elections
- Information Systems
- Public Information
- Revenue
- Telecommunications

Health & Human Services

- Aging
- Children & Families
- Health Services
- Housing
- Human Services

Human Resources/Education

- Education
- Labor
- Management
- Personnel
- Training and Development
- Workforce Development

Natural Resources

- Agriculture
- Energy
- Environment
- Environmental Protection
- Natural Resources
- Parks & Recreation
- Water Resources

Public Safety/Corrections

- Corrections
- Courts
- Criminal Justice
- Drugs
- Emergency Management
- Public Safety

Save in .doc or rtf. Return completed application electronically to innovations@csg.org or mail to:

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This application is also available at www.csg.org.