

COUNTY OF ORANGE HEALTH CARE AGENCY

MEDICAL SERVICES FOR INDIGENTS

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ELECTRONIC APPLICATION SYSTEM SAVES TIME AND MONEY!

PROGRAM OVERVIEW

The Medical Services for Indigents Program (MSI) is a safety-net program for the County of Orange, California serving approximately 20,000 adult patients annually between the ages of 21 to 64 that have no other means of health care coverage.

Over the past 20 years, there had been relatively little advancement of the Program in the area of technology. The Program was functioning mostly as a source of funding as opposed to an integrated managed care type model. There was very little focus on today's technological advances and management systems, which are geared towards controlling utilization and processing patient information faster and more efficiently.

Over the past three years, MSI has shifted from being perceived as just a governmental payment source to an active and progressive managed care style program. MSI has implemented case management and prior authorization of services, built a Provider database for specialty referral coordination, and moved services away from the more costly hospital setting by contracting with outpatient imaging, surgical, and urgent care centers.

Management's primary focus was on technology-based systems that would allow faster communication and processing. These would improve the patient's ability to get access to the needed medical services throughout the County. Recent technology systems introduced to the Program include:

- (1) Hospital Census is reported electronically to the Program from all hospitals in the County and aggregated in a central database. This helps the case managers identify where MSI patients are, and assists in discharge planning and other outpatient care coordination.
- (2) The MSI drug formulary is available for download onto Provider PDAs or desktops. This gives Providers instant information on medications covered by the Program.
- (3) Emergency rooms are connected through a central database of MSI patients. This provides ER personnel instant access to the patient's information and current usage of Provider services. The system also gives ER Providers information on testing or other services performed at any County facility, which helps reduce the need for duplicate tests and identifies Emergency room abusers.
- (4) Applications are taken and processed using an Electronic Application System. This system simplifies the application and eligibility process, and allows faster access to medical services.

All of the above enhancements have improved efficiencies and resulted in cost savings for the Program. These savings have in turn have been used to further enhance services and increase Provider reimbursements.

IDENTIFYING KEY STRATEGIC FUNCTIONS

In order to drive the shift from paper driven manual systems to an integrated technology-based system, the Program started at the beginning of the Patient/Program relationship and built up from there.

In review of what was not working, it was determined that the key element to the patient care continuum was the application and eligibility process. The current process was too slow and cumbersome. Applications were filled out by hand and mailed or couriered to the Social Services Agency. The applications were then processed through the mailroom, distributed to the clerks to check against MediCal, entered into a computer system and then distributed to the technicians for processing. The average length of time it took to get a patient eligible for MSI services was six to eight weeks.

The core problem was that patients who were "pending" (application taken and in progress) could not access services available to eligible members such as Pharmaceuticals, Durable Medical Equipment, Skilled Nursing and Home Health Services. Access to specialty care was also limited due to the unknown patient eligibility status, and whether or not the Program would cover the services. All of these things made it very complicated for the patient seeking care, the Provider preparing to discharge from the hospital and the primary care looking for ancillary services. An evaluation of this process showed that many of these patients would wind up back in the emergency rooms or as inpatients due to the lack of medical access. Once the application was approved, the patient would retrospectively become eligible for services. This system was unnecessarily costing the Program money, since many of the services or visits could have been prevented had the patient become eligible sooner rather than later.

An evaluation of the system showed an opportunity for overall system improvement including; reduction of costly and unwarranted services, improved patient/Provider satisfaction, cost savings, and most importantly, increased access to medical care. It was decided that the best course of action was to completely automate the process and implement an electronic application and eligibility system. The system would have defined parameters including:

- Flexibility to comply with the rules of eligibility for the Program
- User friendly from start to finish, requiring minimal training for new users
- Robust enough to process the high volume of applications and generate needed reports
- Monitor and track individual and overall system processes
- Fit within the limited Program budget and time frames

CHOOSING THE RIGHT SYSTEM

The Program distributed a bid request for the proposed system and received numerous responses. The proposals were equally received from both large well-known national entities, as well as local and national smaller companies, most with backgrounds in both the Healthcare and the Technology fields.

An evaluation committee was formed and the proposals rated based on the requirements of the initial Program request. The field was narrowed down to four entities, final questions and evaluations were done and the bid was awarded to NetChemistry, Inc., based out of Newport Beach, California.

The outline of their proposed system fit the parameters as described above, and they were willing to custom build the Program instead of trying to make an already "canned" system fit the Program's needs. In evaluating the proposed systems, NetChemistry was a clear winner. Their ability to understand the current system and turn it into an automated one, custom designed and within budget, made this an easy decision by the committee.

The new system was designed and implemented to spec within 6 months of awarding the bid and the transition from manual to electronic was smoother than anticipated. NetChemistry was within time and budget; they built a system more robust and user friendly that was proposed, without additional fees or negotiation tactics. I am not sure this could not have been possible with a large corporate entity with layers of staff and bureaucracy.

It is important to remember that bigger is not always better, and if you can custom build a system tailored to the specific nuances of your Program, for equal to or sometimes substantially less than those offering a pre-built off the shelf type system, you are much better off. Government run programs differ from county to county and your system should be designed for your needs, not the needs of someone else. There are many vendors to choose from, with many different packages and options, we evaluated many of them, and in the end, we chose a custom designed, fully integrated cost effective system from NetChemistry to manage the application and eligibility process for the MSI Program in Orange County.

The new system went live on July 1st, 2005, as was planned, and we have seen a dramatic increase in production, faster processing of patient applications and positive responses from all parties. We are now able to monitor volumes, view trends, and most importantly, provide patients access to needed healthcare services faster, easier and more cost effective than ever before.

For our Program, it was a simple choice, NetChemistry.

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