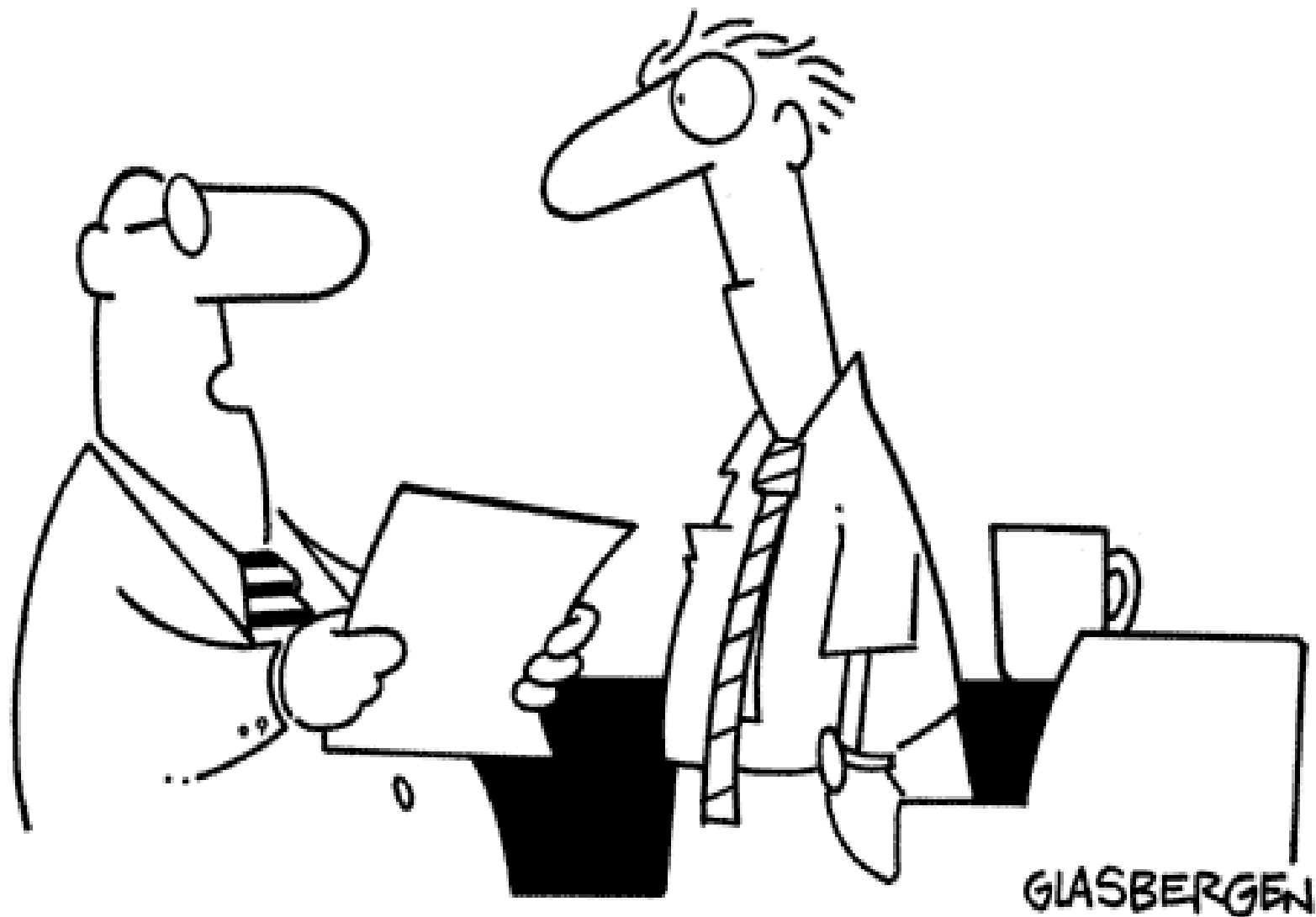


ARRA
Innovative Projects to Improve
Reimbursement in Public Health
Department Clinics

Immunization Services Division
NCIRD
November, 2010





“I want you to find a bold and innovative way to do everything exactly the same way it’s been done for 25 years.”

Project Overview

- 70% of public health clinics do not bill for immunization services.
- Fully insured patients are receiving 317 vaccine in public health clinics, how many we are not sure.
- Savings as a result of not providing 317 vaccine to fully insured patients will allow the program to provide additional vaccine services.



Project Overview (Cont.)

- NVAC recently recommended that “states and localities develop mechanisms for billing insured children and adolescents served in the public sector”.





I DON'T WANT THE
GOVERNMENT INVOLVED
IN HEALTH CARE AND
GETTING DEEP INTO
MY POCKETS!

POWELL 7/26/09

Projects Funded

- Arkansas
- Arizona
- California
- Colorado
- Georgia
- Iowa
- Louisiana
- Montana
- New York
- New York City
- Ohio
- Oklahoma
- South Carolina
- Washington



Savage Chickens

by Doug Savage



Project Goals

- Facilitate strong active support from a network of stakeholders that will be necessary for the development of a successful billing program.
- Determine what resources and processes will be needed to develop a successful billing program.
- Provide analysis of data to determine benefits and potential barriers to the development of a successful billing program.
- Develop a program plan that will enable public health clinics to bill private health insurance for immunization services.
- Assess the ability for this billing program to operate successfully.



Billing Plan

- State profile
- Description of stakeholder involvement
- Current capacity to bill for all services
- State regulations that may support or hinder the billing process for immunization.
- Overview of potential barriers or resistance to billing
- Agreements that may be necessary with payers
- Mechanisms to bill private insurance
- Break even analysis
- Public health arguments in support of billing
- Financial arguments in support of billing
- Assessment of readiness to begin billing
- Discussion of needs associated with implementing billing plan



Project Management

- Insurance 101 – Training included AHIP, CMS, and other partners.
- NIC Networking meeting
- Routine monthly ARRA calls
- Subject matter calls – every six weeks



Accomplishments

- Fourteen projects funded with a total of \$6,653,680
- All 14 project staff have been hired and are in place.
- All 14 projects have engaged stakeholders and are moving forward in the planning process.
- Inclusion of partners on a national level (ie. AHIP, ASTHO, NACCHO, CMS)
- Four of the 14 projects have already begun piloting. Others are expected within six months.
- Additional state programs have contacted CDC with interest in billing programs and are working on moving forward on such a program. (ie. MA, AK, VA)



Challenges for Budget and Timeline

- Issuing contracts and state personnel systems
- Hiring of personnel
- Writing and approval of RFA's
- Addressing national level issues
- Budgets and timeline appear to be on schedule to be completed as stated in the approved program plans.



Challenges for Project Implementation

- Preferred provider status
- Credentialing
- Laws or policies in place that may help or hinder implementation.
- Contracting with 3rd party insurance plans
- Understanding what can and cannot be done with regard to vaccine purchase, supply, and billing.
- Consideration of the implications of Health Care Reform



Ultimate Outcome/Impact of the Project

Fourteen immunization programs with a tested plan to begin billing on a state wide basis for vaccine services provided to patients that have private insurance.





“You see them float by now and again when somebody down there is thinking too far out of the box.”