11th Annual Health Information Management (HIM) and Business Office (BO) Partnership
"Making Every Dollar Count"

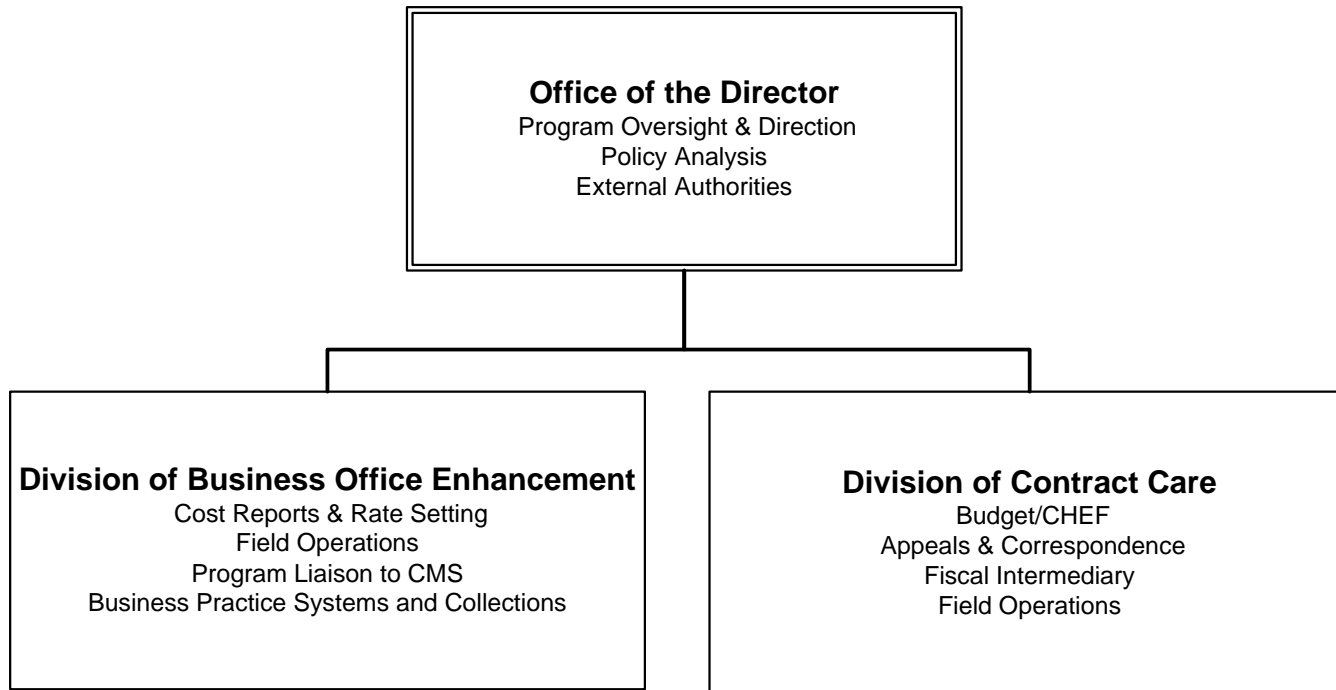**ORAP**
Division of Business
Enhancement

Office of Information
Technology
OIT

www.ihs.gov/NonMedicalPrograms/Business Office/index.cfmweb

Office of Resource Access and Partnerships

Office of the Director
Program Oversight & Direction
Policy Analysis
External Authorities

Division of Business Office Enhancement
Cost Reports & Rate Setting
Field Operations
Program Liaison to CMS
Business Practice Systems and Collections

Division of Contract Care
Budget/CHEF
Appeals & Correspondence
Fiscal Intermediary
Field Operations

11th Annual HIM and BO Partnership "Making Every Dollar Count"

- "Preparing for Challenges in Third-Party Claims Processing, 1999"
- "Building the Foundation, 2000"
- "Together Everybody Achieves More, 2001"
- "Strengthening our Partnership for Healthier Indian Communities, 2002"
- "Partners for Compliance, 2003"
- "Bring the Partners Together, 2004"
- "Planning Solutions to Improve Business Process, 2005"
- "You Are The Essential Piece, 2006"
- "Partnership is not a Gamble…It's a Sure Thing, 2007"
- "A Decade of Building Partnerships to Improve Health Care for Native People, 2008"
- "Making Every Dollar Count, 2009"
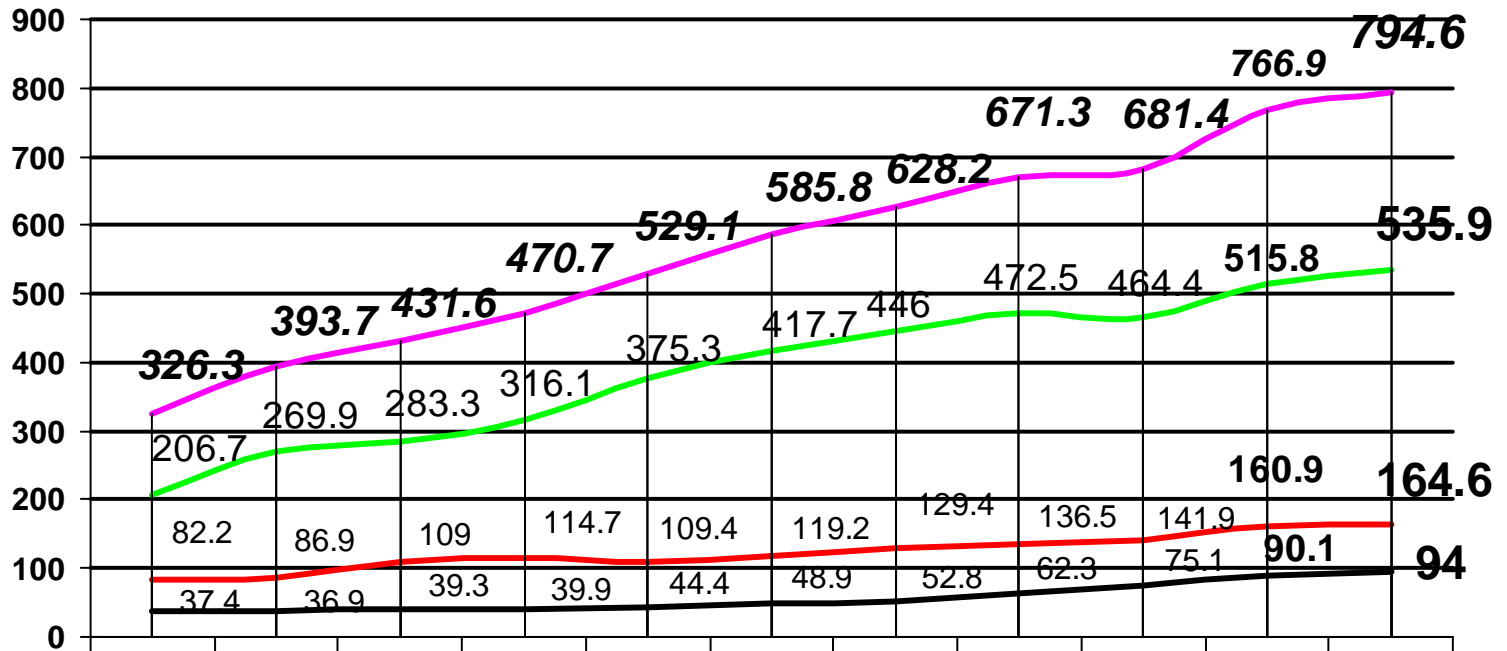
What I Plan to Cover

- Revenue trends impacts Indian Health Service- (IHS-) wide

- Update Office of Resource Access and Partnerships (ORAP) and Division of Business Office Enhancement (DBOE) projects

- Audit updates relating to third-party revenue
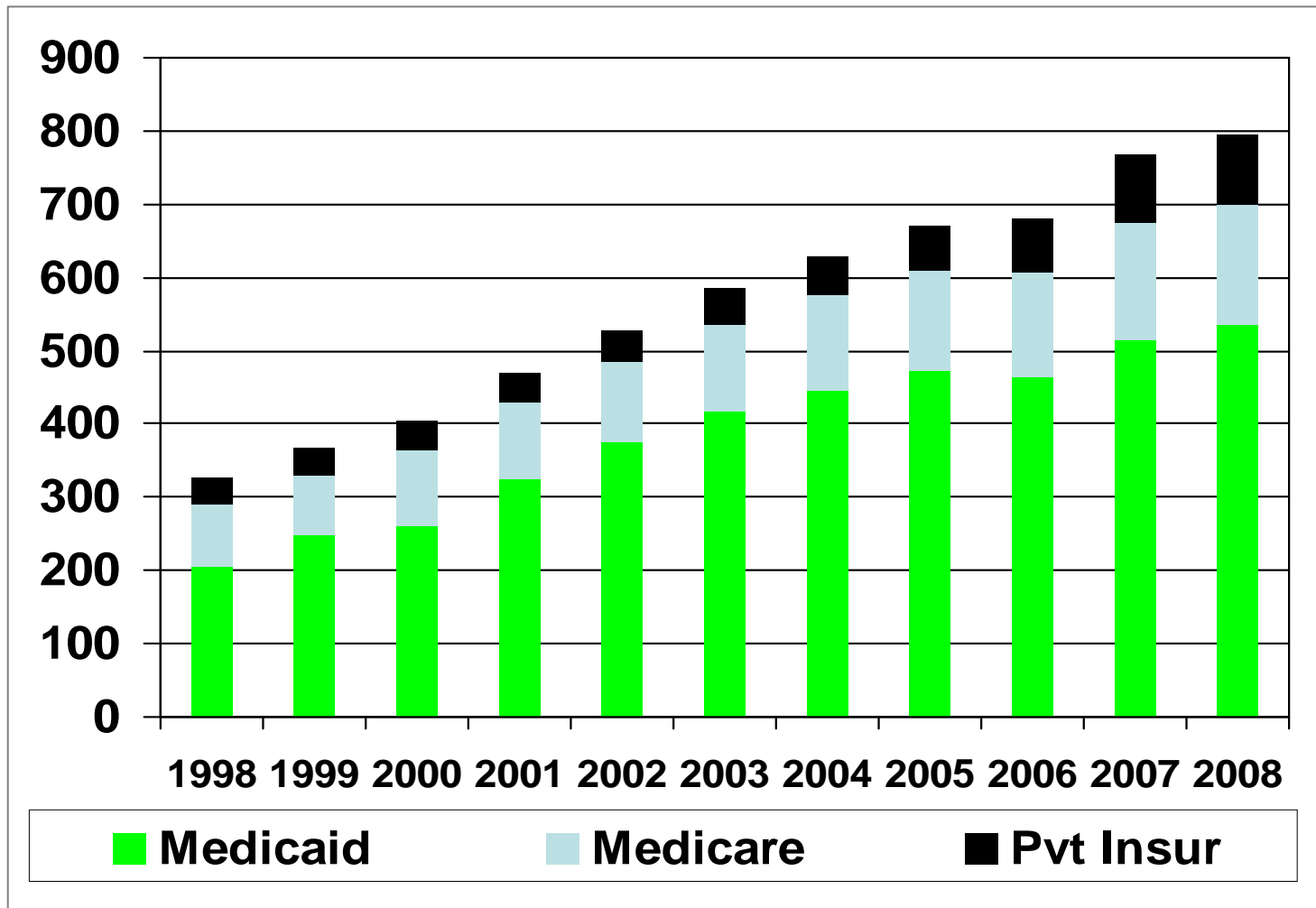
Revenue Stream Impacts

- Macro or Big Picture
  - Medicare and Medicaid (M&M) Rates, Laws, Policy (Federal and states)
- Micro or business operations, or revenue cycle—the famous 15 steps, or "wheel of fortune" as it is known
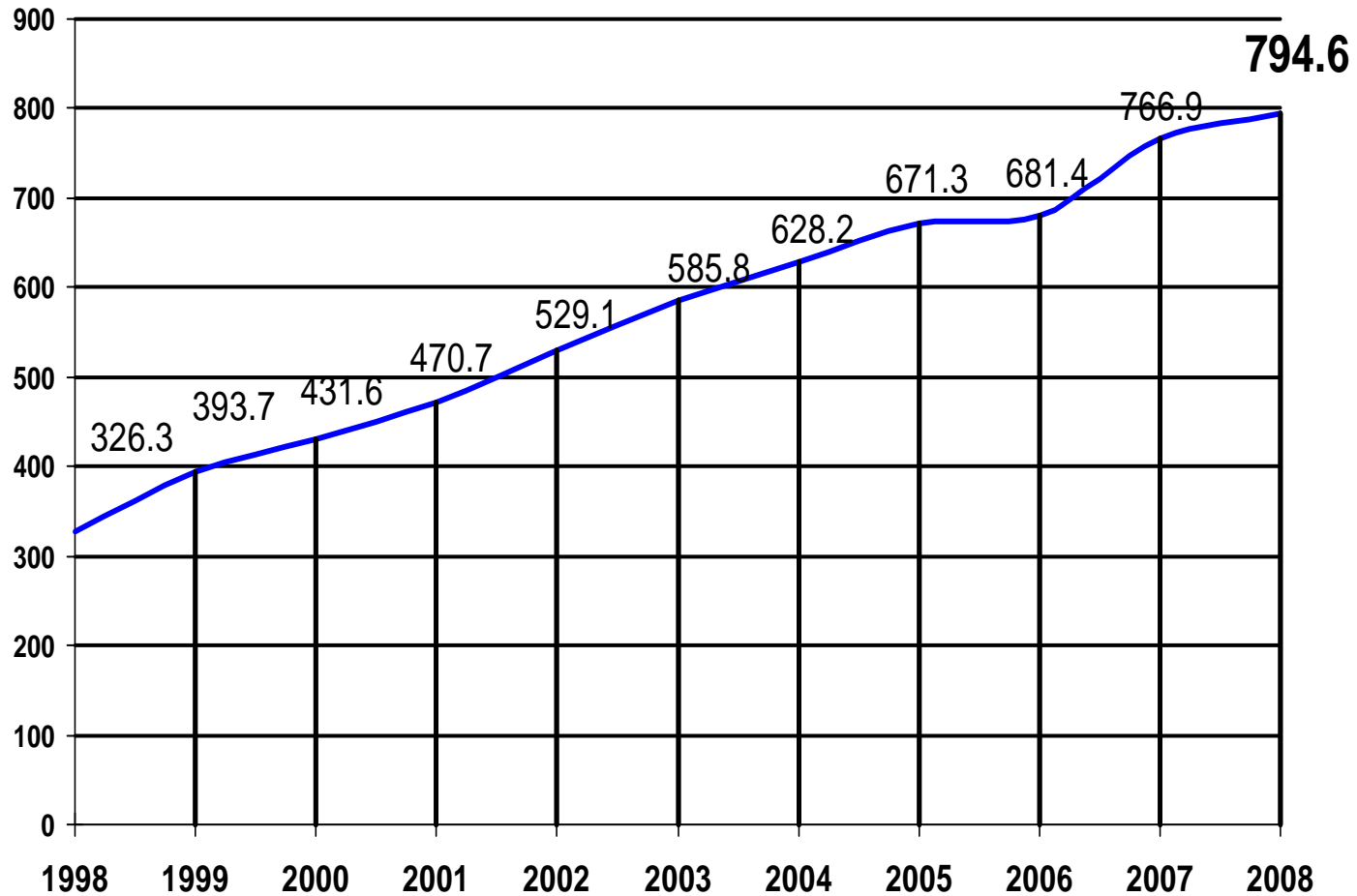
IHS Collections by Major Payer 1998-2008

	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008
Medicaid	206.7	269.9	283.3	316.1	375.3	417.7	446	472.5	464.4	515.8	535.9
Medicare	82.2	86.9	109	114.7	109.4	119.2	129.4	136.5	141.9	160.9	164.6
Pvt Insur	37.4	36.9	39.3	39.9	44.4	48.9	52.8	62.3	75.1	90.1	94
Total	326.3	393.7	431.6	470.7	529.1	585.8	628.2	671.3	681.4	766.9	794.6

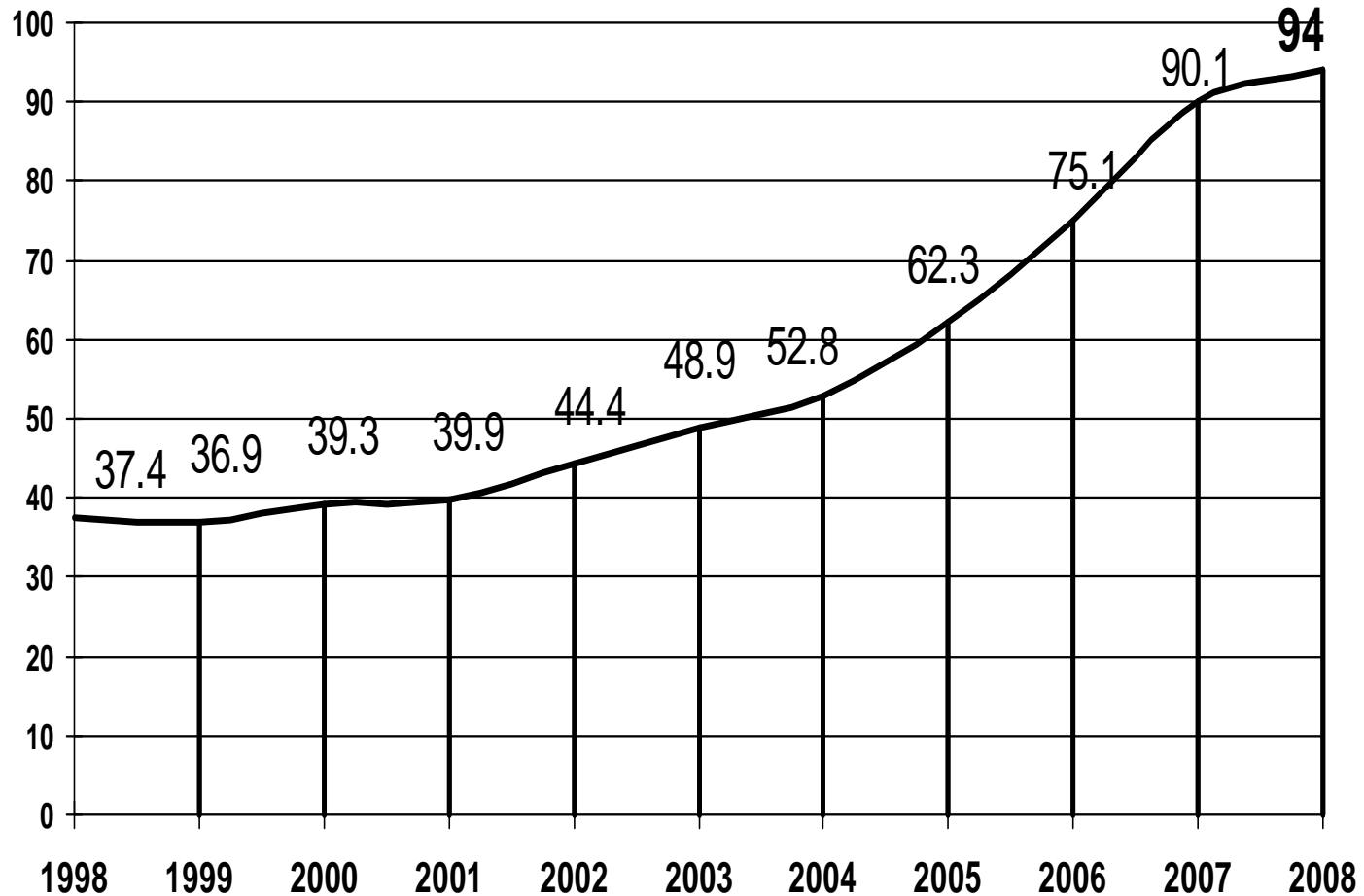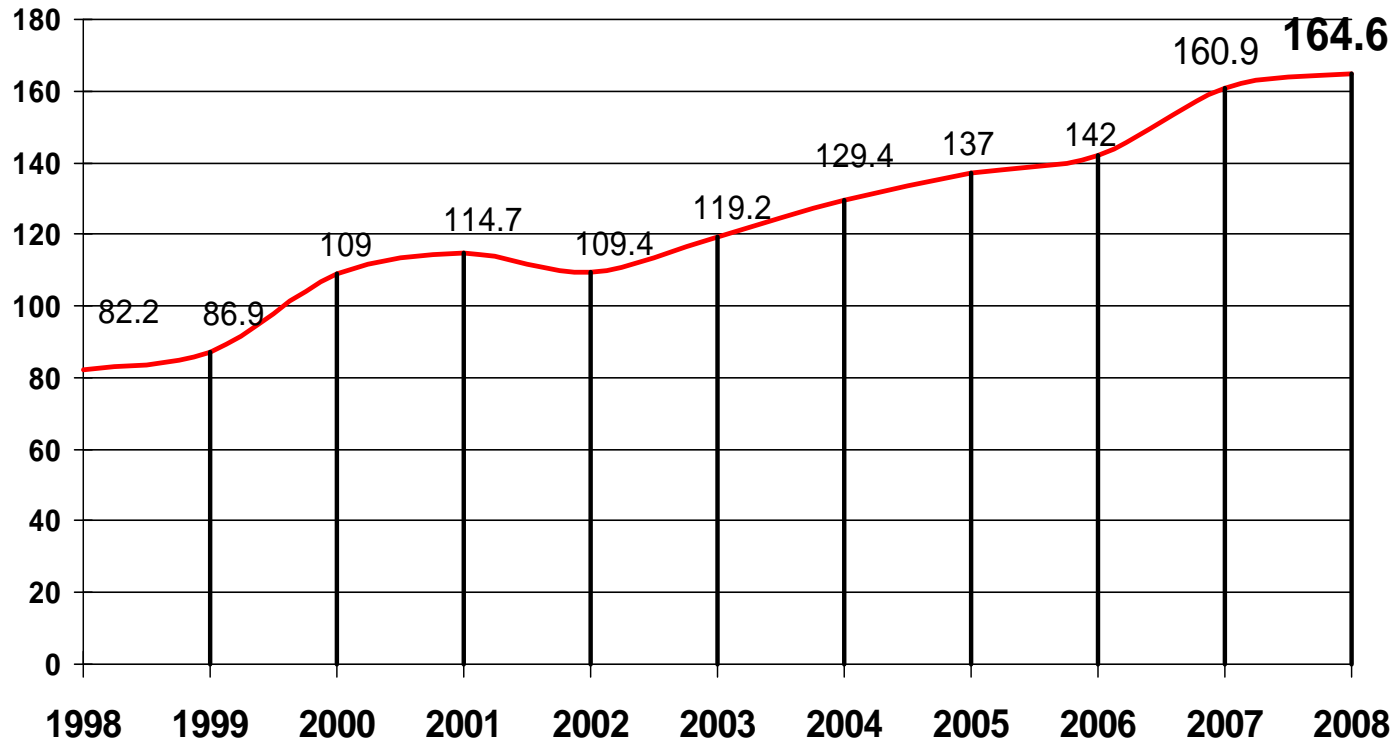# IHS Third-Party Revenue 1998–2008
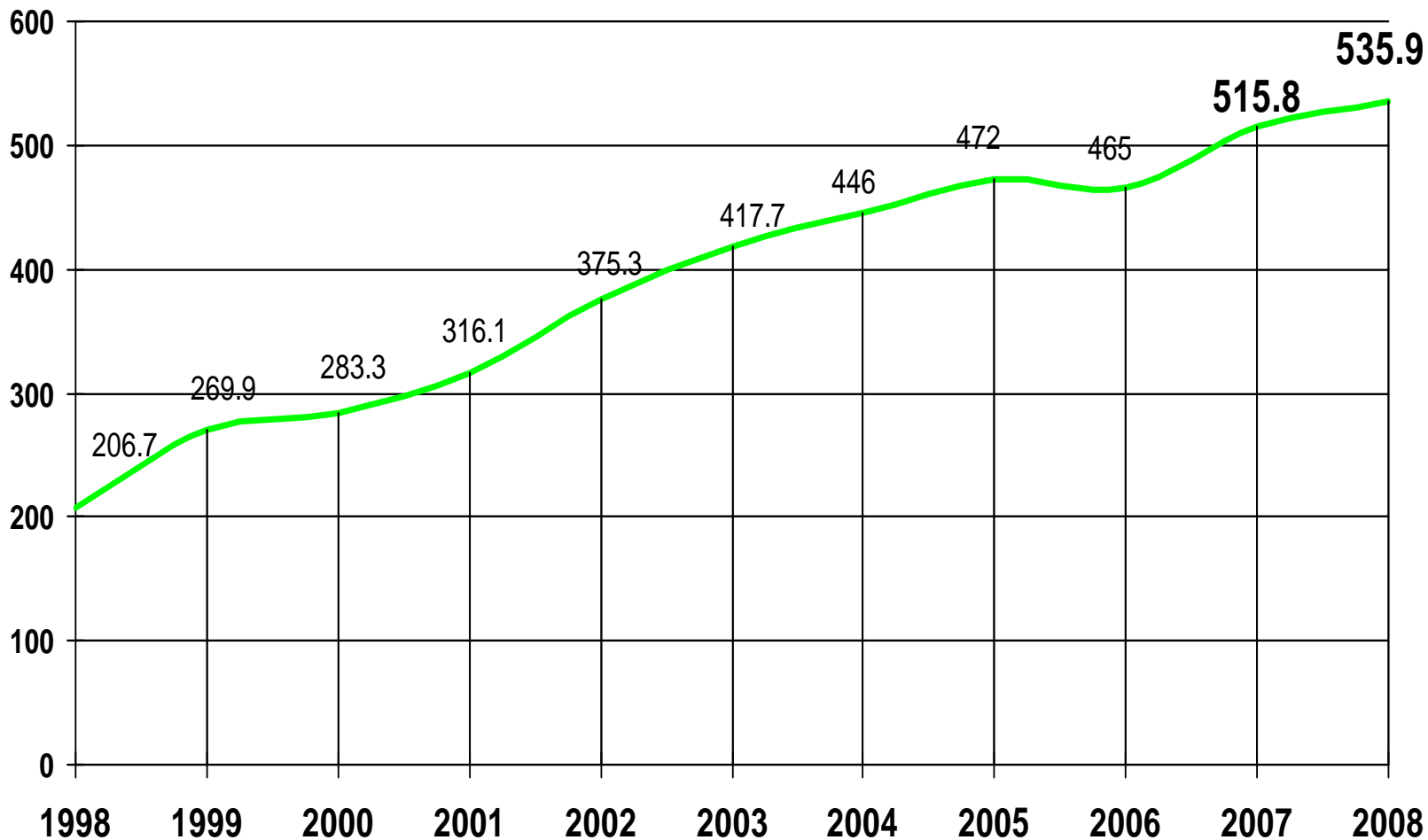
IHS Collections
1998–2008

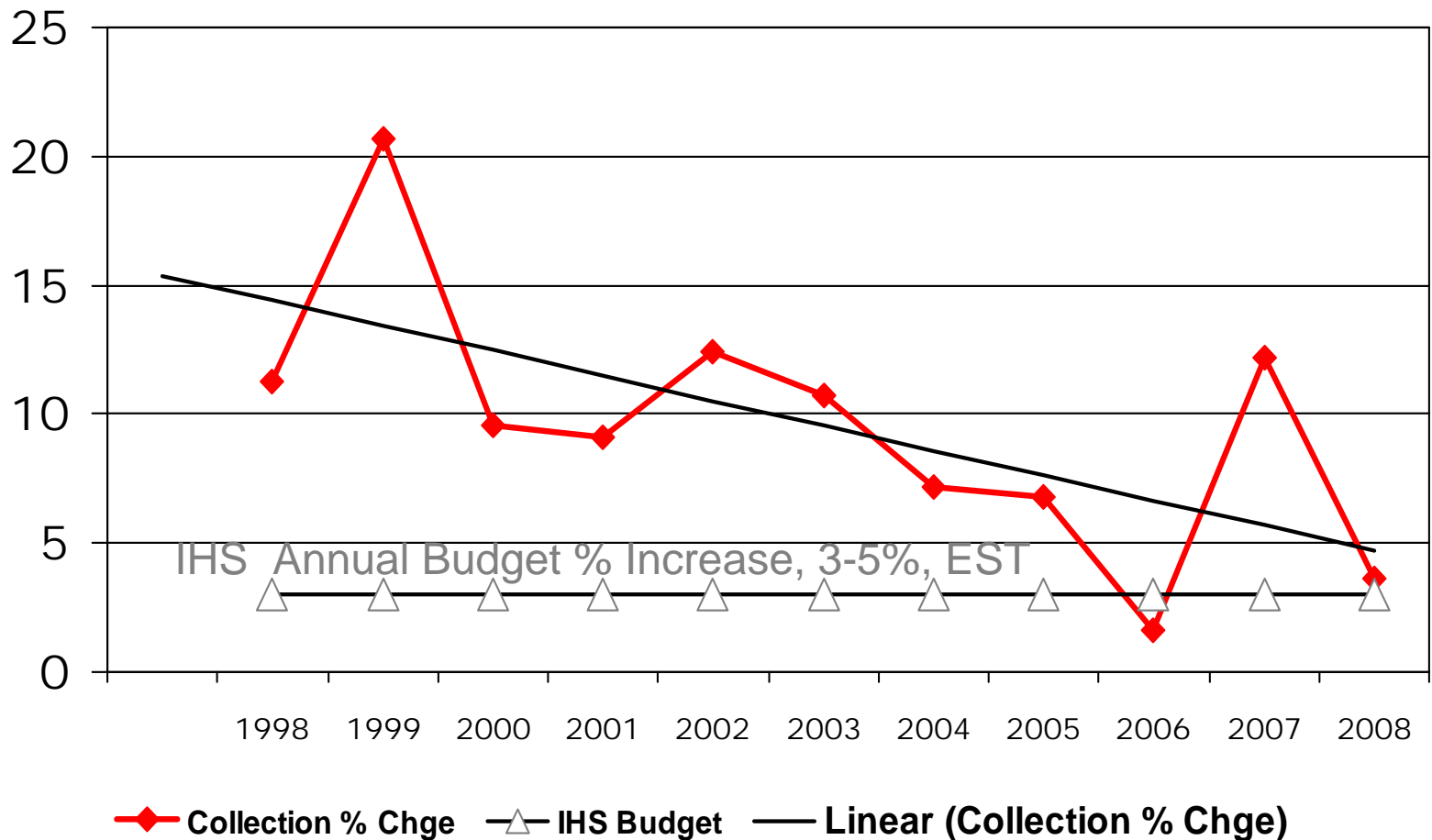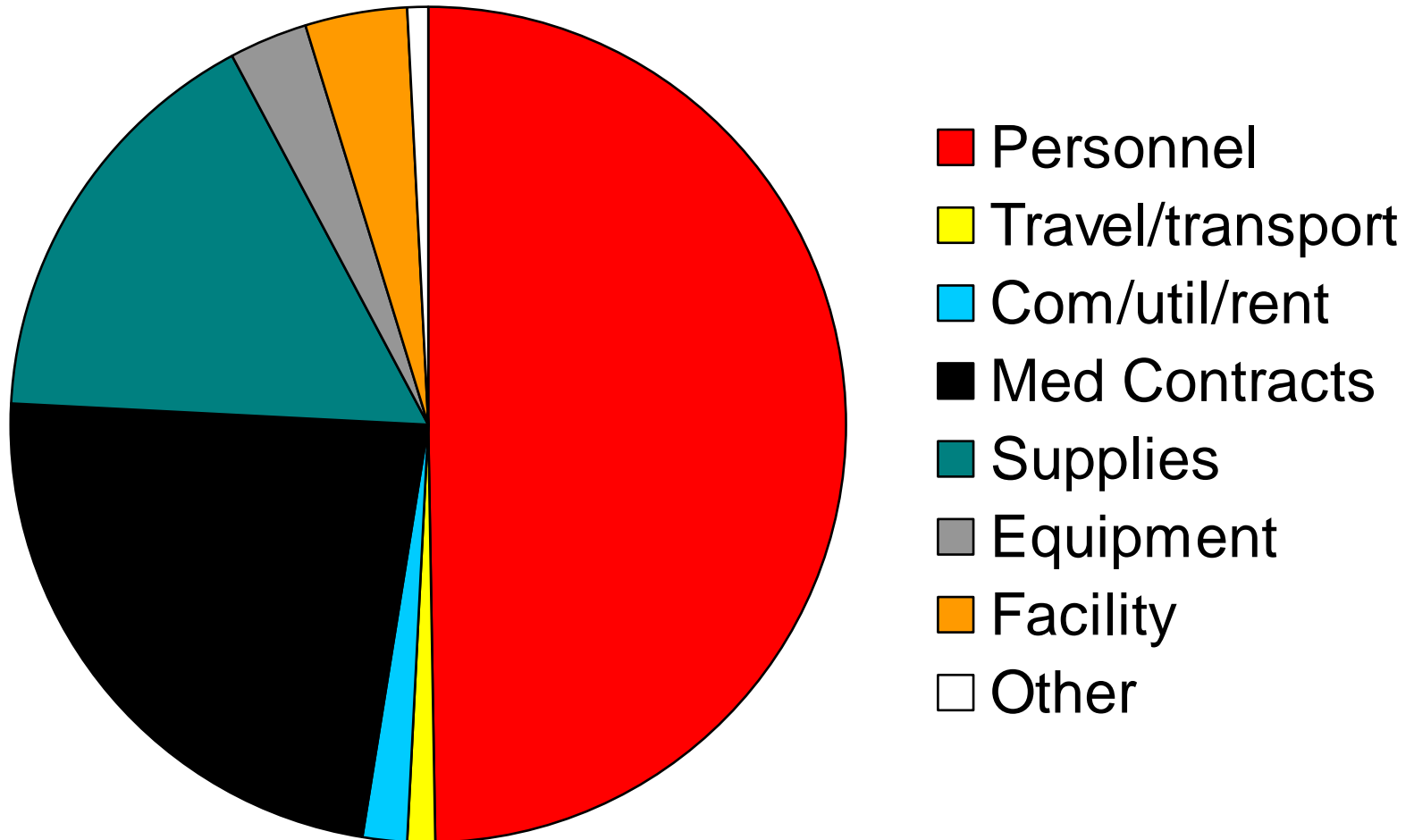# IHS Private Insurance Collections 1998–2008

IHS Medicare Collections 1998–2008

IHS Medicaid Collections 1998–2008

Annual Percent Change in IHS Collections, 1998–2008

2007 Obligations, Third Party Revenue

- Personnel
- Travel/transport
- Com/util/rent
- Med Contracts
- Supplies
- Equipment
- Facility
- Other

Ongoing Projects at Headquarters ORAP

- Cost Reports to set rates
- Review M&M laws, regulations, policies
- Liaison with National Indian Health Board (NIHB) and Medicare and Medicaid Policy Committee (MMPC)
- Liaison to Center for Medicare and Medicaid Services (CMS) Tribal Technical Advisory Group (TTAG)
- Department of Health and Human Services (HHS) Interagency Coordination, i.e., CMS, other
- Liaison with NBOC and Workgroups, PR, 3P, Point of Sale (POS)
- Internal Controls Policy, online tool
- Congressional budgets: track collections and prepare data
- POS, DME, RHAQDAPU, E-Prescribing: track and monitor numerous acronyms that represent potential opportunities
- Resource and Patient Management System (RPMS), training, policies etc.
- ResourceSmart, patient benefits coordination

FY 2009 Training

- In 2009, CEO Training Agenda: *green sheet*.
- AR 101: four regional sessions….plan for next steps
- IC online tool: Data for Plan
- CMS Outreach and Education: M&M
- Trailblazer training schedule
- Web based

Third-Party Audit Updates

- 2008 Office of the Inspector General (OIG) Cost Report Audit, Draft
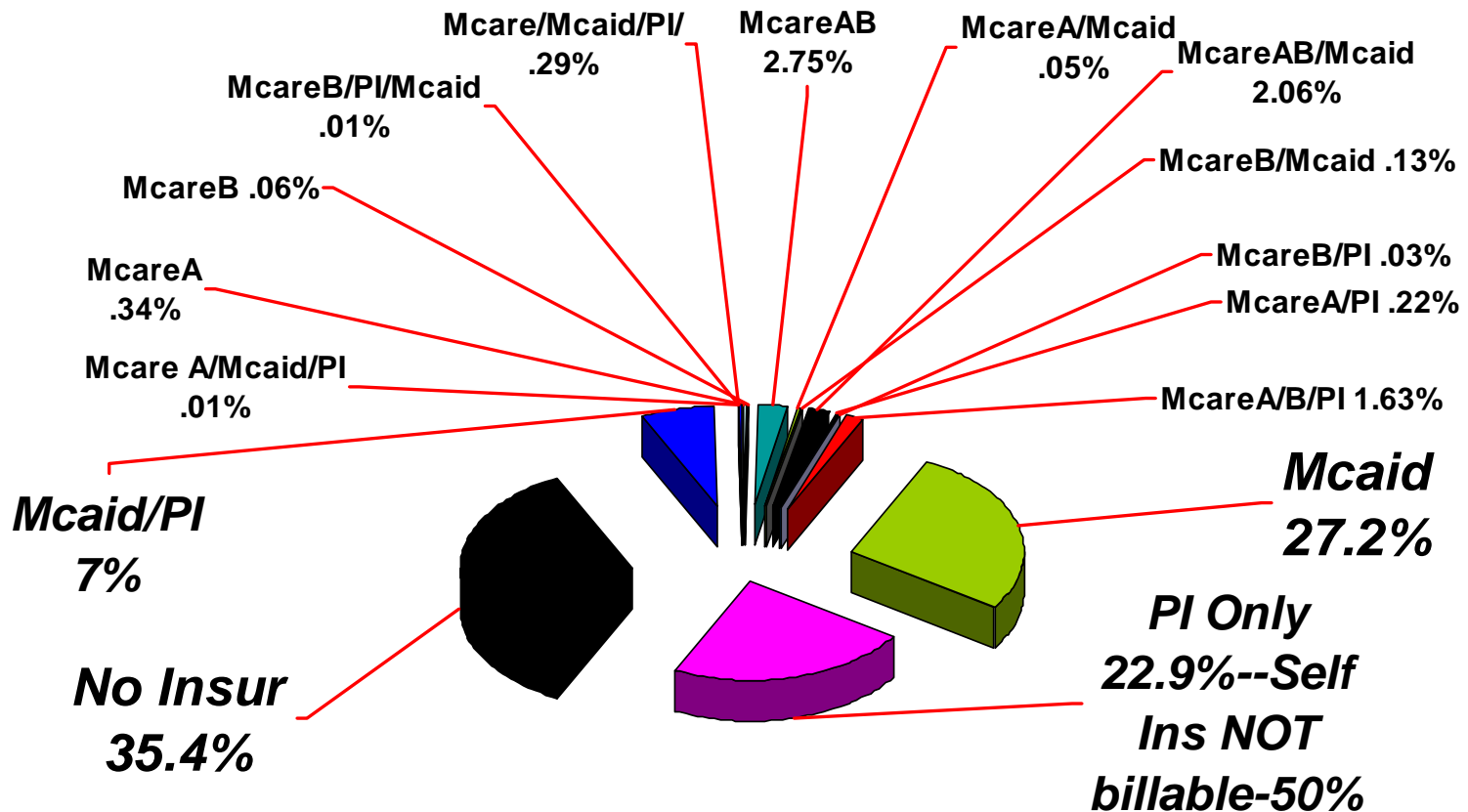- Indian Health Manual (IHM) Part 5, Chapter 1, Third-Party Internal Controls: online tool preliminary results
- 2008 General Accounting Office (GAO) Study…Utilization of Alt Resources—final
- 2009 GAO Private Insurance Audit…..not complete
- OIG workplan for 2010
  - State Federal Medical Assistance Percentage (FMAP) claiming
  - All inclusive rate paid by states

Optimizing Resources Access and Care

ResourceSmart

Optimizing resources, access & care.

IHS Total Eligibility Categories
By Percent, 2006, 1.4M users

Mcare/Mcaid/PI/ .29%

McareB/PI/Mcaid .01%

McareB .06%

McareA .34%

Mcare A/Mcaid/PI .01%

McareAB 2.75%

McareA/Mcaid .05%

McareAB/Mcaid 2.06%

McareB/Mcaid .13%

McareB/PI .03%

McareA/PI .22%

McareA/B/PI 1.63%

Mcaid/PI 7%

No Insur 35.4%

Mcaid 27.2%

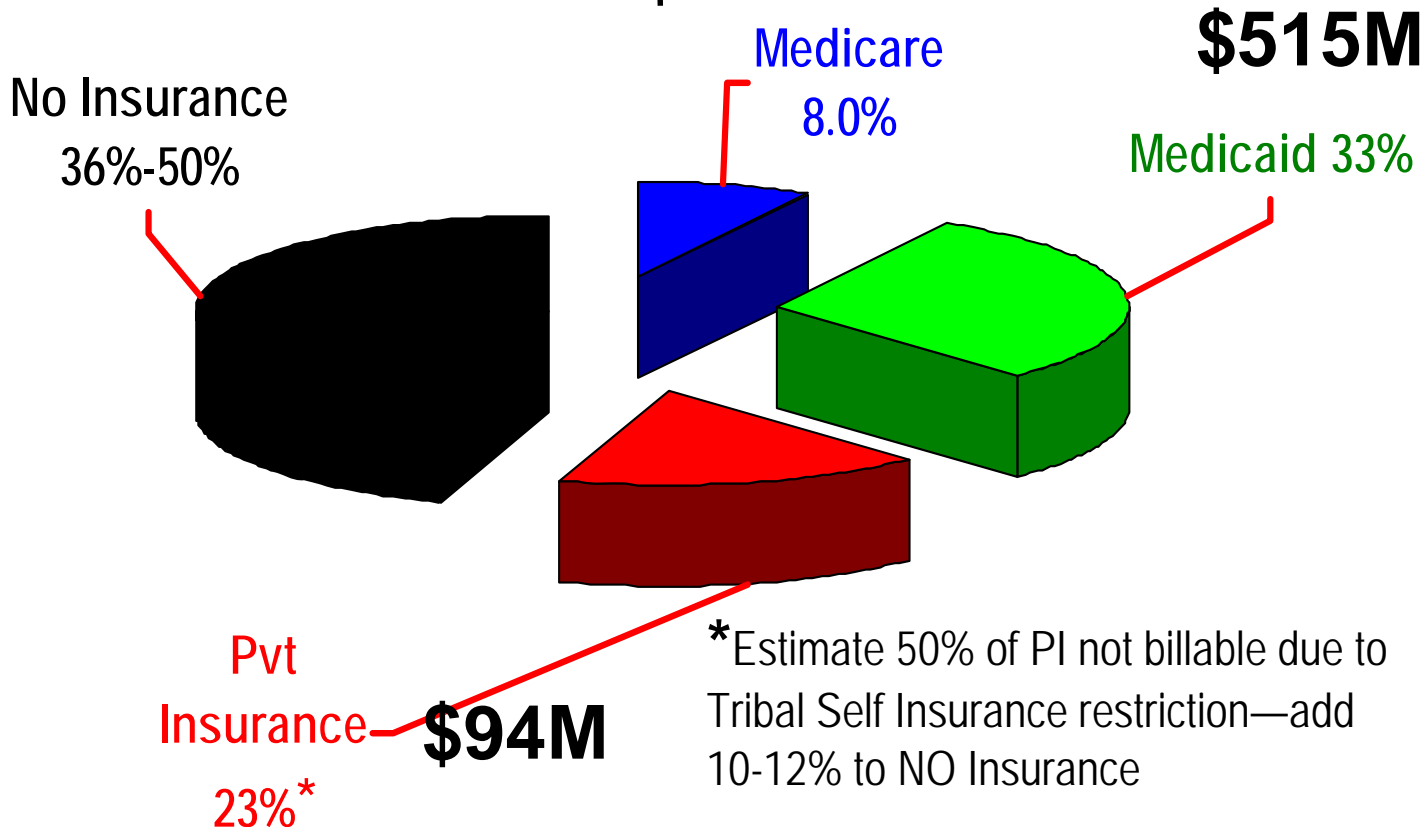*PI Only 22.9%--Self Ins NOT billable-50%*

McareA.34%	McareB.06%	McareAB2.75%	McareA/Mcaid.05%
McareB/Mcaid.13%	McareAB/Mcaid2.06%	McareA/PI.22%	McareB/PI.03%
McareA/B/PI1.63%	Mcaid27.2%	PIOnly22.9%	No Insur35.4%
Mcaid/PI7%	Mcaid/PI/Mcare A .01%	Mcaid/PI/McareB.01%	Mcaid/PI/McareAB.29%

IHS Eligibility*, 1.42 Million Users 2006

$164M

$515M

Medicare 8.0%

No Insurance 36%-50%

Medicaid 33%

Pvt Insurance 23%*

$94M

*Estimate 50% of PI not billable due to Tribal Self Insurance restriction—add 10-12% to NO Insurance

*Merged 16 combinations of coverage

New ORAP Project

- Practice Management Software (PMS) *Transition*

ORAP DBOE

- Headquarters
  - Elmer Brewster, HQs
  - Balerma Burgess, HQs
  - John Rael, Albuquerque
  - Kris Kirk, Albuquerque
  - Cynthia Larsen, Billings
  - Debbie Hunter (HQs Sec)

Any Questions or Comments?