

Government of Guam
Guam Memorial Hospital Authority
FMIP Implementation Status Report
MARCH 2007

Reporting period: January 1- March 30, 2007

Overall Status

During this reporting period; the Financial Management Improvement Plan (FMIP) Core Team of the Guam Memorial Hospital Authority continued the review of existing Hospital processes, and policies and procedures to define causes and effects of the existing financial environment relative to the FMIP project. As the Core Team identify incongruent issues in the financial and operational processes specific to each of the major FMIP goals, a special team is tasked to investigate and make report findings to the Core Team for review, assessment and redefine project task objectives to mitigate its adverse effects as necessary. On March 1, 2007, Mr. James Barnhart was appointed as interim FMIP Project Manager until Ms. Bertha Pangilinan's return. GMHA's second quarter operational requirements involving most of the FMIP members placed added pressure on the FMIP project efforts since Core Team members attended to their respective job duties to drive these requirements in support of patient care. Overall, the team continued efforts to perform the various task and activities outlined in their respective goals. Albeit for this reporting period progress has been slow; the Core Team remains dedicated and steadfast in its effort to achieve the FMIP project's stated objective to improve the hospital's financial position.

Technical assistance provided: None

Status of Quick Hits

1. Add GMHA to the GovGuam Employee Separation Clearance Form to ensure all GovGuam, autonomous agency, and legislative and judicial branch employees clear the hospital before separating from employment.

Person responsible: Martha B.

Memoranda to all GovGuam autonomous agencies, legislative and judicial; were received by their respective administrators and were reviewed and all agencies have complied with the Hospital's request with the exception of GPA. The Hospital Management is in communication with GPA to encourage compliance at this time.

2. Ensure all collectors have access to a telephone, telephone line and the internet.

Person responsible: Frank T.

Task completed; recommend removal on next report.

3. Revitalize the previous linen study and ensure recommendations are fully implemented

Person responsible: Gordon M. / Jim B.

The team lead by the Chief of Environmental Services completed its review of the initial linen study, and has determined the initial premises has changed, i.e., at the time of the initial study, GMHA's oversight and control of the laundry operation has improved under the current management. The FMIP Core Team received an update on the progress of the linen study at its February 22, 2007 FMIP meeting. Recommendation is to purchase of a linen dispensing unit to improve linen flow and control.

4. Establish an education and accountability campaign on the need to promptly enter billing information. The Assistant Administrator for Professional Support Services should immediately meet with a pilot group to explore the best approach to resolving the delayed charges.

Person responsible: Zennia P.

Assistant Administrator of Professional Support Services was informed in regards to implementation of Quality Assurance measurements for respective departments. In consideration of the recent iMed program implementation; a review utilizing current data being compiled is underway to evaluate the campaign's continued need or to realign the campaign objective as needed.

5. Monitor registration and billing for cases in which the 23 hour observation period is converted to inpatient status to assess whether charges are being dropped or billed inaccurately.

Person responsible: Joy V. / Lou T.

Memoranda distributed to all Nursing Units in reference to the 23 hour observation process to an Inpatient admission. Quality Management compiles and reports the number of cases each month with corrective actions taken, and submits the report to Hospital management for their review and input.

6. Assign a Medicaid/MIP specialist to GMHA to qualify patients' onsite. The GMHA Administrator should meet with the Director of Public Health and Social Services to negotiate this action.

Person responsible: Lou T.

No update this reporting period.

7. Compile information on post payment denials. Inform the appropriate departments and take action to improve problem areas.

Person responsible: Joy V.

Utilization Review Coordinator is currently working with Department Heads on implementing a quality assurance plan in order to improve and correct deficiencies.

8. Establish a list of account receivables from collection agencies and begin writing off accounts that cannot be collected.

Person responsible: Frank T. / Martha B.

The process is still pending the completion of flagging and submission to the Hospital Management and the Board of Trustee to begin writing off accounts deemed uncollectible.

9. The GMHA Administrator should request the Board pass a resolution allowing electronic recordkeeping.

Person responsible: Vince Q.

No update this reporting period.

10. Eliminate the Master Patient Index cards.

Task completed; recommend removal on next reporting period.

Status of Strategic Goals

Goal 1: GMHA will improve the billing process to ensure (1) patient information is accurate and complete, (2) charges are properly captured and applied, and (3) the bill is issued in an accurate and timely manner.

Person responsible: Goal 1: Champion – previously Lillian P. (vacant); Sponsor – Bertha P.; Members - Lou T., Elizabeth B.

Complete the ER registration while the patient is on the premises – FMIP Core Team Member, Lou Tenorio continues to review department procedures on acquiring actual John/Jane Does' information from GPD; No update this reporting period.

Utilize the FastForm system to obtain signatures— No update this reporting period.

Increase the number (and percentage) of patients are pre-registered— No update this reporting period.

Establish access to databases which allow independent verification of patient information— **No update this reporting period.**

Review and enforce communication mechanisms and policies for initiating level of care changes— **Policy enforced and memoranda distributed to both Nursing and Servicing Departments.**

Ensure patient registration staff understand and follow registration procedures and level of care changes—**Staff Meeting scheduled for September 30, 2006.**

Strengthen collection efforts at Patient Registration— **No update this reporting period.**

Monitor and report on Patient Registration performance— **No update this reporting period.**

Develop an awareness campaign on the importance of capturing all charges and the need for accurate billing— **Task completed; recommend removal on next reporting period.**

Re-instate the denied charges reports to departments.

A monthly audit is conducted by the Quality Management/Utilization Review Department. Reports are prepared and disseminated to departments for their review and corrective actions. Utilization Review Coordinator meets with each Department Manager and review reports. Potential corrective actions is discussed and implemented.

Periodically perform a post discharge audit for areas with high potential for error.

A monthly audit is conducted by the Quality Management/Utilization Review Department. Reports are prepared and disseminated to departments for their review and corrective actions. Utilization Review Coordinator meets with each Department Manager to review reports. Potential corrective actions is discussed and implemented.

Reduce the submission time for physicians to submit their charge vouchers and medical professional fees to 4 days— **No update this reporting period.**

Revise the policy on the number of days for input of charges to order communications and patient information systems and discrepancy with bill generation policy (four days) — **existing policy are under review; no update this reporting period.**

Process claims via the Electronic Media Claims system— **No update this reporting period.**

Require the Billing Supervisor to establish pre-billing work list— **No update this reporting period.**

Renegotiate with insurers on documentation requirements— **No update this reporting period.**

Revise or clarify the public law requiring Legislative review of all new or revised medical charges— **No update this reporting period.**

Use the updated DT pricing model for new charges— **No update this reporting period.**

Goal 2: GMHA will improve cash flow through expanded and more efficient collection efforts.

Person responsible: Goal 2: Champion – previously Rey V. (Vacant); Sponsors –Frank T.; Members - Martha B., Jun I., and Frumen P.

Properly match staff with workload—**Staff assessments have be completed and submitted to personnel for action; awaiting update and will monitor progress with Human Resource Department.**

Update and implement collection policies— **Work in progress.**

Begin collections during the registration process— **No update this reporting period.**

Contract with collection agencies— **the multi-step bid offers were evaluated and awards are pending the conclusion of legal review and contract approval.**

Create a campaign to educate the public—**Core Team defined the campaign methodology and informational requirements; enlisted the support of Facilities Maintenance to create a display and prominent placement in a public space in the Hospital. A task meeting between a select FMIP team and Facilities is set for early April 2007 to finalize objectives. Planned implementation date is end of April 2007.**

Liquidate property— **No update this reporting period.**

Modify global rules to differentiate between bad debt write-off amounts, contract discount amounts, collection agency referrals and interest charges— **No update this reporting period; recommend removal on next reporting period.**

Redesign the Chart of Accounts in order to produce profit and loss statements by servicing departments— **No update this reporting period.**

Redesign the Chart of Accounts to enable easier and more accurate Medicare cost report preparation— **No update this reporting period.**

Establish a Charge Master Review team update project— No update this reporting period.

Establish and implement a Charge Master Update project— No update this reporting period.

Review and update the Charge Master Maintenance procedures— No update this reporting period.

Update GMHA personnel on Charge Master Issues— No update this reporting period.

Goal 3: GMHA will control costs by improving inventory management controls and ‘right-sizing’ staffing levels.

Person responsible: Goal 3 champion – Zinnia; Sponsors – Danny M.; Member - Jim B.

Assess magnitude of ‘leakage’ problem— awaiting completion of goal 2; patient charge master update.

Establish process improvement team for ward/unit inventory control— awaiting completion of goal 2; patient charge master update.

Review and document Fire Department/EMT usage of supplies and linens in ER— No update this reporting period.

Establish accountability for inventory management among end users— awaiting completion of goal 2; patient charge master updates.

Enhance hospital information system to handle inventory management better—Materials Management has concluded its system trials on the AS-400 IM 5.0 upgrade; go-live is scheduled for early April 2007.

Establish bar coding for all supplies, materials, and equipment— No progress to report for this reporting period.

Identify and implement portable supply stations for all units/wards that provide patient care— Portable supply station requirements identified; awaiting availability of funding source.

‘Right-size’ staffing levels— No update for this reporting period.

Goal 4: GMHA will increase its net revenues 75% (by 2009) by providing new services, improving reimbursement rates for insured patients (Medicare, Medicaid, MIP, Compact Impact, and third party payers) and decreasing the percentage of uninsured patients.

Person responsible: **Goal 4: Champion – PeterJohn C.; Sponsors – Glenda L.G.; Members – Martha B., and Jun I.**

Provide new services— No update for this reporting period

Increase Medicare reimbursement rates— Pending response from CMS on revised Medicare Cost Report submitted in June 2006 by Jeff Wolf.

Decrease percentage (and number) of uninsured patients— Response received from Department of Public Health and Social Services on the study conducted; Task completed.

Increase Medicaid reimbursement rates— No update for this reporting period.

Implement EMC and EMR for all payers— Pending approval of users’ access to Hospital AS400 system to commit changes in the Patient Information Module; no update for this reporting period.

Establish emergent care facility— No update for this reporting period.

Goal 5: GMHA will be a paperless environment by 2010.

Person responsible: **Goal 5: Champion – Wilfred A.; Sponsors – Vince Q., Members - Tony L. and Danny M.**

Establish a paper reduction project— No update for this reporting period.

Review and revise medical record retention policies— No update for this reporting period.

Start automation project for paperless environment— No update for this reporting period.

KEY ISSUES

Identify any critical issues, especially ones that affect implementation progress or affect many components of the plan. None for this reporting period.

RECOMMENDATIONS FOR GOVGUAM

Recommendations for this month: None for this reporting period.

Continuing recommendations from prior months: None for this reporting period.

RECOMMENDATIONS FOR DOI

Recommendations for this month: None for this reporting period.