

# Non Emergency Medical Transportation



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September 18, 2015

# NEMT Abbreviation

- ❑ NEMT is an acronym used to denote Non – emergency Medical transportation services
  - ❑ Excludes 911 ambulance calls
  - ❑ Excludes LifeStar/LifeFlight Services

# Topics Covered

- ❑ Brief Overview of the NEMT Program
- ❑ Methodology employed to reorganize the Connecticut Operations Center
  - ❑ Evaluation of Connecticut Operations
  - ❑ Piloting Change
- ❑ Reorganization of the Departments
  - ❑ Call Center and Transportation Departments

# Topics Covered Cont.'

- Reorganization of Remaining Support Departments
  - Billing Department
  - Quality Assurance
  - Support Positions Added

# Topics Covered Cont.'

- Technological Improvements
- New Projects
- Program Data

# Meaningful Background Information

Number of Unduplicated Riders	<b>26,351</b>
Trips Provided in CY 2014	<b>4,336,518</b>
Total Trips Provided 1 <sup>st</sup> Quarter 2014	<b>1,033,788</b>
Cost of Trips 1 <sup>st</sup> Quarter 2014	<b>\$15.51 million</b>

# Purpose of NEMT

## **Federal regulations (42 CFR 440.170):**

- To provide Non-Emergency Medical Transportation for members of the HUSKY A, C and D programs to a Medicaid covered service when no other means of transportation is available.
- NEMT can only be given for a Medicaid covered service.
- Transportation must be the most appropriate and cost effective Level of Service (LOS) needed by each HUSKY Health member being served.

# 2015 Activities

**January 5, 2015:**

**New management arrived at the Connecticut LogistiCare facility**

- First priority - evaluate operations:**
  - Call Center Performance
  - Improve Training Materials and Presentation
  - Prior Authorization System
  - Claims Processes
  - Quality Assurance/Complaints

# Evaluation of Operations

## Objectives:

- create a new workplace culture
- retain employees

## Desired outcomes:

- improve employee engagement with operations
- create a member centric environment and delivery system

# Evaluation & Implementation

- ❑ **Focus has been on improving the efficiency of the CT operations**
  - ❑ Teaching and Learning
  - ❑ Coaching and Mentoring
  - ❑ Developing Listening Skills
  - ❑ Professional Demeanor
  - ❑ Process Improvement

# Internal Reorganization

## Internal reorganization of units:

- ❑ Department names were changed to reflect actual responsibilities and tasks being performed
- ❑ Restructured departments and their internal operations to increase efficiency in work flow
- ❑ Call Center changes focused on ways to improve employee retention and performance in order to meet all contractual requirements

# Internal Reorganization

## ❑ **Transportation Unit**

- ❑ efficient trip assignment/routing, improve trip re-routing process, ensure provider network adequacy, and better monitoring of provider performance

## ❑ **Utilization/Verification Department**

- ❑ better perform clinical and administrative reviews for Notices of Action

## ❑ **Billing/Claims Unit**

- ❑ improve efficiency, timeliness and accuracy of provider claims processing

# Internal Reorganization

## Split the call center into functional areas:

- Reservation line
- Mass Transit and mileage reimbursement
- Verification of forms unit

## Staffing Level Configuration

- Reviewed for the entire Connecticut Operations Center

# Call Center

## **Reservation Line**

- Staff for the reservations and “Where’s My Ride” (first move) lines were combined
- Created a utilization center for the clinical review of forms
- Verification center created with separate phone prompt to handle forms processing activities

## **Mass Transit and Mileage Reimbursement**

- Order and distribute tokens/passes to members and programs
- Process train pass funds
- Process gas mileage reimbursement authorization and payment

# Call Center

## **Verification Unit**

- Implemented a dedicated authorization line to provide real-time access for healthcare providers and members to check the receipt of forms and status of trip requests
- Moved the unit to the Utilization Review Department

## **General Call Center changes:**

- Automated authorization forms to allow for electronic submission, eliminating manual printing, faxing and handling by staff
- Cross trained data entry employees to assist with high call volumes during peak times
- Enhanced training to keep staff up to date with changes
- Increased engagement between supervisory and line staff

# Call Center

## □ Outcomes

- ✓ Reduced wait and hold times experienced by healthcare providers and members
- ✓ Reduced incoming reservation center calls by reducing the number of calls abandon and need for call backs
- ✓ Improved turn around time to process trip requests
- ✓ Created time to make outbound calls to members and healthcare providers
  - ✓ Notification of approvals or denials
  - ✓ Opportunity to request additional information needed to make timely determinations

# Call Center

## ☐ Outcomes

- ✓ Increased staff productivity by 23% (calls per day per staff increased from 50 to 65 per day)
- ✓ Decreased staff turnover from 47% (2014) to 24% for the first half of 2015

# Call Center Stabilization

- ❑ Cross trained data entry employees to assist with high call volumes during peak times
- ❑ Continued refresher training sessions to keep staff up to date with any changes
- ❑ Audited random reservation calls
- ❑ Began conducting one on one sessions between supervisors and frontline staff to discuss accomplishments and opportunities for improvements

# Transportation Department

- ❑ Moved the “Where’s My Ride” (second move) phone line and staff to the call center because of experience with the provider network
- ❑ Moved the Next Day, Urgent and Discharge call staff into the Transportation Department due to their specific duties, knowledge of the provider network and service areas
- ❑ Dedicated the unit solely to trip routing, re-routing and securing short notice transportation
- ❑ Automated through a web based fax system, streamlined the transportation provider cancellation and reroute process for reservations

# Transportation Department

## □ Outcomes

- ✓ Increased the time available for securing alternate transportation for members and improved service delivery by 33%
- ✓ Increased ability of providers to take on additional trips requiring same day scheduling

# Technological Improvements

- ❑ Added FAX Presses to all Departments
- ❑ Added each of the forms submitted for the member to the member's electronic file in the call center system
- ❑ Updated the phone system
  - ❑ Added a dedicated prompt to the call center incoming line to allow the caller the choice of pre-routing to Authorizations (Verification Unit) or to the Mass Transit Unit in addition to the general reservations line

# Billing Department

- CT Operations billing department functions were moved to LogistiCare's centralized billing center in Virginia
- Staff members moved to other units to better utilize manpower resources
- Will be implementing an on-line attestation process

# Quality Assurance Department

- ❑ Hired a new manager to solely handle quality assurance related issues
  - ❑ Concentrates on:
    - Complaints
    - Training activities
    - Auditing processes

# Quality Assurance Activities

- ❑ Implemented a new complaint tracking form to improve investigation and reporting of complaints to DSS
- ❑ Worked with LogistiCare medical review team to update forms used in CT
- ❑ Created an active training module to use with new hires
- ❑ Actively working with outreach coordinator to improve communications
- ❑ Coordinates with Transportation Department to identify areas for improvements in transportation activities

# Quality Assurance Training Activities

- ❑ Created and facilitated “Sensitivity and Difficult Caller Training” into all new hire training modules
- ❑ Created an enhanced complaint training module to improve the complaint input process by frontline call center representatives
- ❑ Dedicated staff to randomly audit calls to improve and ensure quality customer service
- ❑ Training plan and checklist developed for improved consistency
- ❑ Improving job aids and system directories location for accurate and quick reference opportunities

# Other Changes

- ❑ Created an internal Employee Action Committee to have employees be an integral part of change and cultivate a better work environment
- ❑ Created an Advisory Committee to bring all stakeholders together to evaluate problems and create workable solutions
  - ❑ Composed of transportation providers, hospital representatives, members and medical/behavioral health providers
  - ❑ Meets monthly on every third Thursday at LogistiCare's CT Operations Office

# Other Changes

## ❑ Created a Reporting Manager position

- Evaluates new processes via data collection and analysis of data/outcomes (Balanced Scorecard Approach)
- Looks at meaningful outcomes to ensure new processes are working as intended

## ❑ Created an Outreach Staff position

- Provide education of processes to facilities
- Systems support to all facilities

# Pilot Projects

## Preferred Facility Discharge Providers

- Improved times that members had to wait for a ride home from the hospital

## Direct Call to Transportation Providers

- Has improved the wait times after an appointment

## Chemical Dependency Facility Transition

- Has had a beneficial effect on members to decrease travel time each day

# Outcome of Pilot Projects

## ❑ **Dependency Facility Transition**

- ❑ LogistiCare and ValueOptions staff evaluated ~1,200 members traveling distances greater than 15 miles by livery for chemical dependency treatment
- ❑ Transitioned 277 members to closer facilities

## **Remained at Their Current Dependency Facility**

- ❑ 5 members transitioned to take home services
- ❑ 29 members had their own transportation
- ❑ 9 members opted for gas mileage reimbursement
- ❑ 159 members require further evaluation
  - ❑ 23 missing documentation to attend specific programs

# Projects

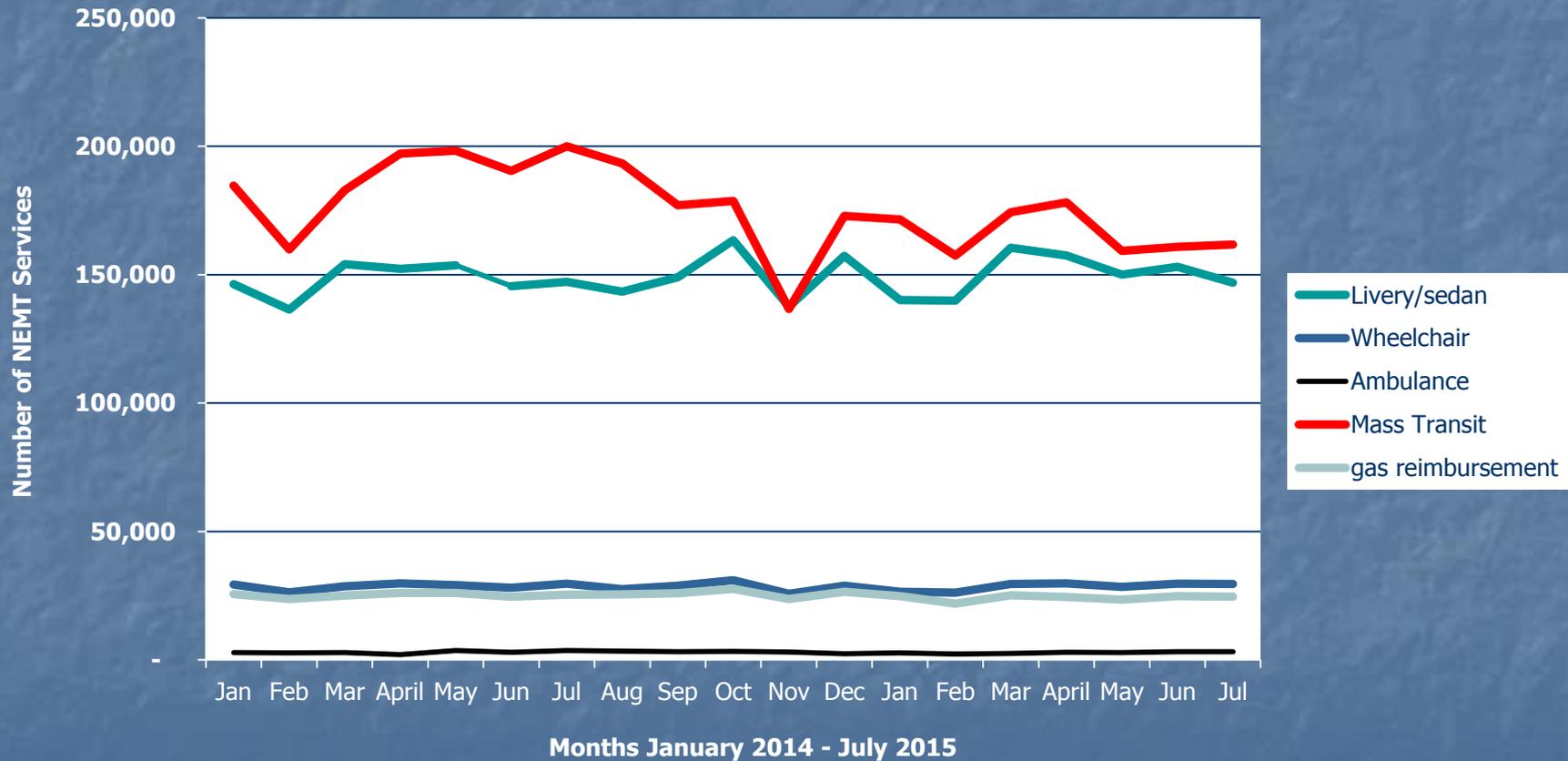
- ❑ Stakeholders, LogistiCare and DSS staff finalized individual membership brochures for LogistiCare to distribute
- ❑ DSS staff developed a User's Guide for NEMT Services

# Utilization Data

**How do we monitor program change and its effect on program performance against the program goals?**

*Through the use of data analytics which provides feedback on the efficacy of the process changes implemented.*

# Mode of Transportation (Level of Service)

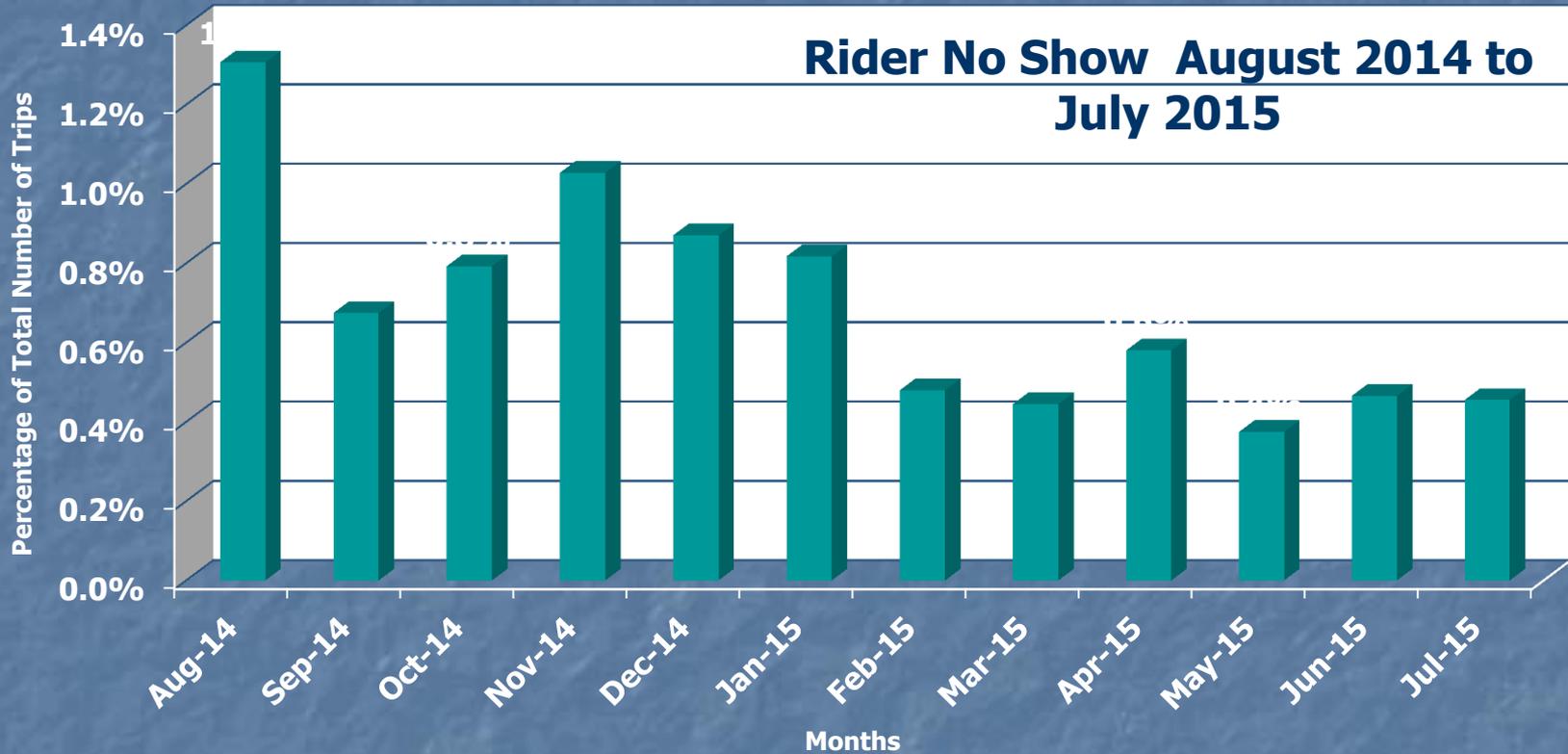


# Total Trips Delivered Compared to Membership and Riders

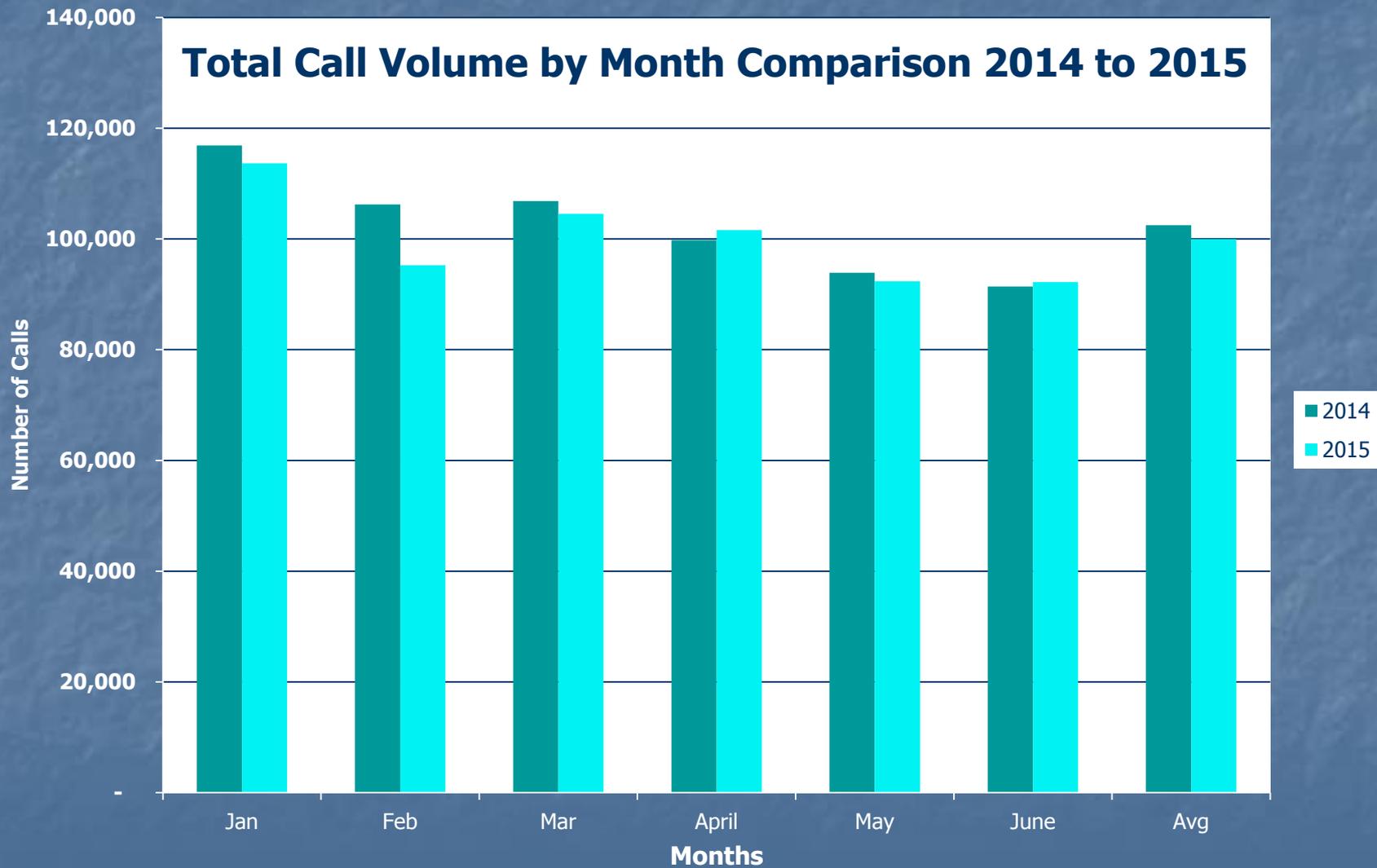
## Members, Unduplicated Riders and Trip Volume Comparison 2014 to 2015



# Rider No Show

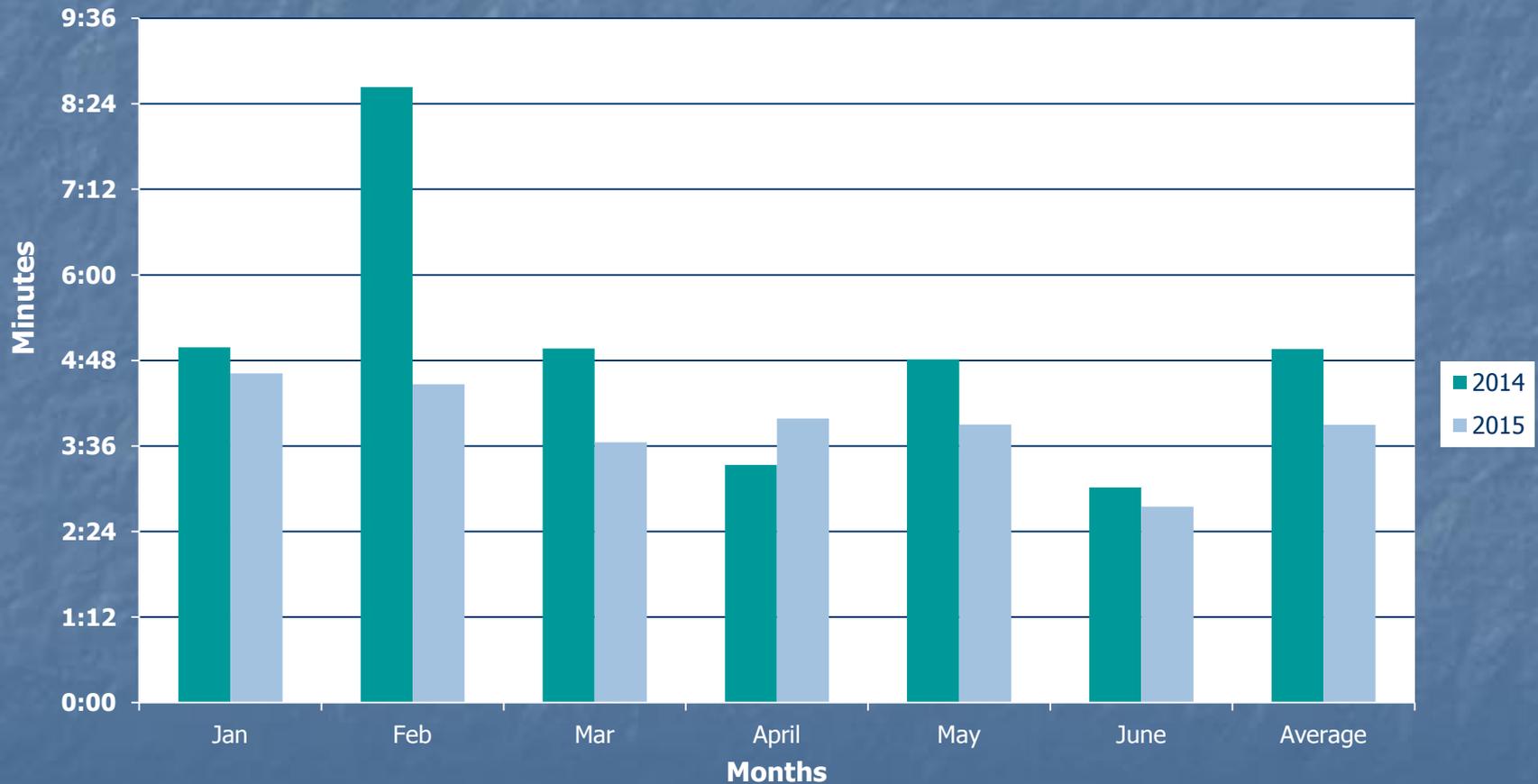


# Call Center Volume



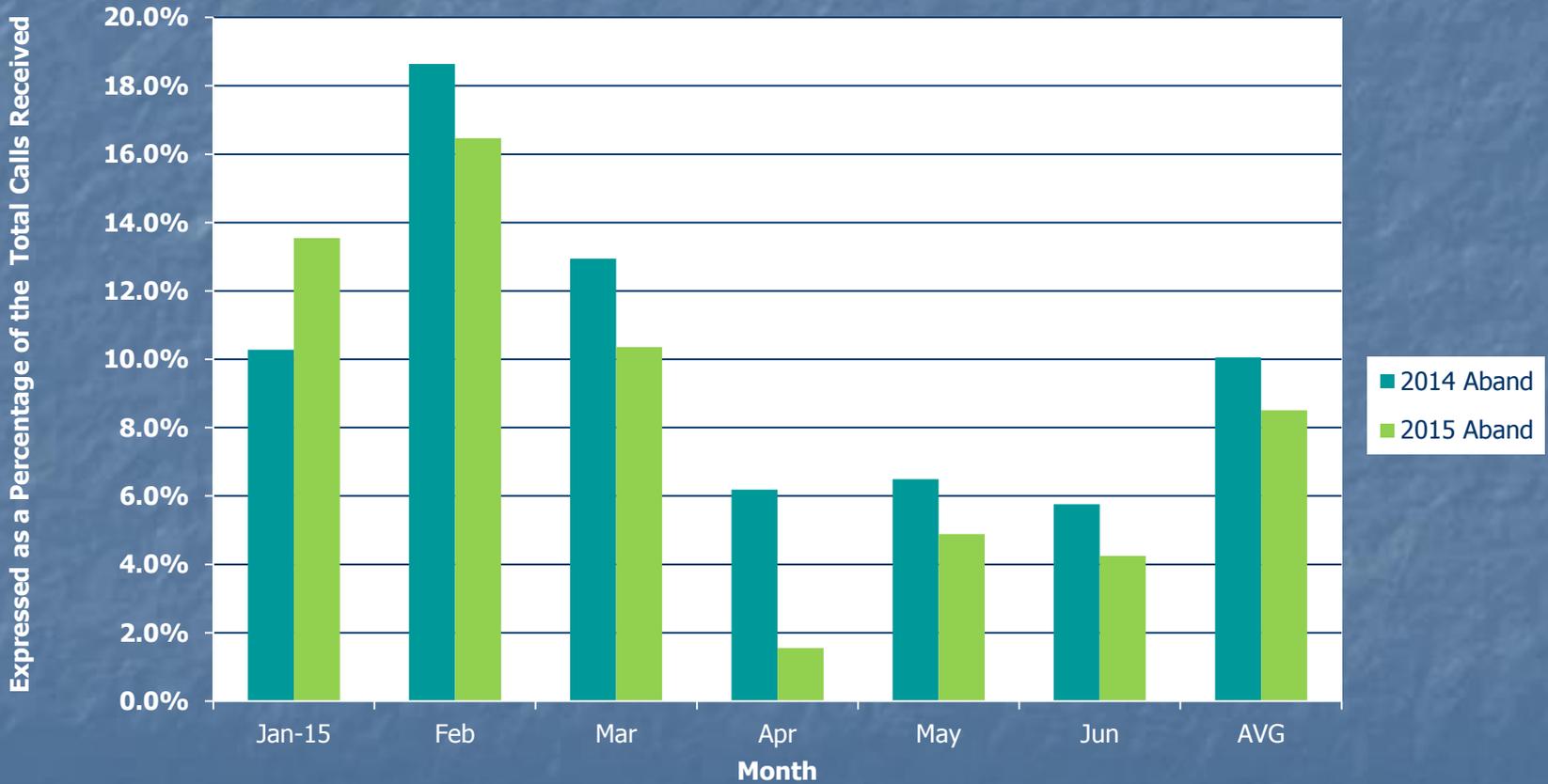
# Average Speed to Answer Calls

## Average Speed to Answer Comparison 2014 to 2015

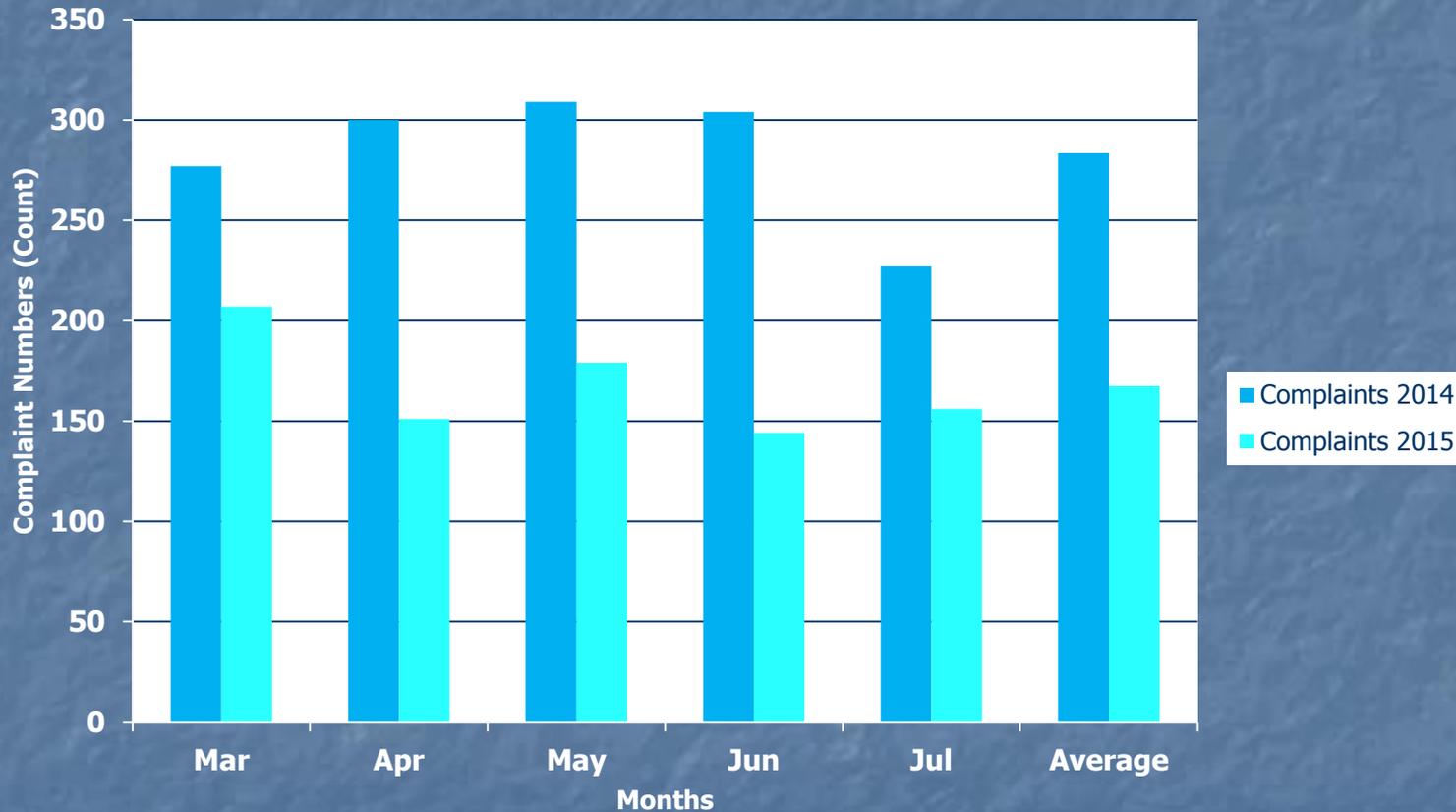


# Call Abandonment Rate

## Abandonment Rate Comparison 2014 to 2015



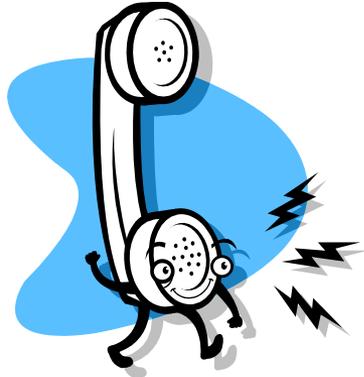
# Complaints 2014 vs. 2015



# Impact of Changes

- ❑ Customer - centric service for both providers and members
- ❑ Processes have been streamlined reducing the need for repeat phone calls and form submission
- ❑ Real – time information available to members and providers regarding status of submissions and forms

# Scheduling Reservations



## Phone:

**Members 888 - 248 - 9895**

**Facilities 888 - 866 - 3287**

## Fax:

- ❑ **Facilities 866 – 529 - 2138**
- ❑ **Members: not currently available**



## Online

- ❑ **Members \* <https://member.logisticare.com>**
- ❑ **Facilities \* <https://facility.logisticare.com>**

*\*user registration required\**

# Ongoing Work

- ❑ Continue to illicit feedback from members, providers, advocates and other stakeholders regarding where program improvements can be made.
- ❑ Continue to use the Balanced Scorecard approach to identify areas for improvement and measure outcomes of change.
- ❑ To hold ourselves, transportation providers & LogistiCare accountable for providing timely transportation to our members.

# Questions?

