



HCAP Highlights

January 2011

315 Mulholland St.
Bay City, MI 48708

Phone: (989) 891-8820

Toll Free: 800-799-6172
(Michigan only)

Fax: (989) 891-8161

Website:
www.myhcap.com

Special points of interest:

- TransEngen
- Electronic Prescribing
- Shared Funding

Inside this issue:

Electronic Prescribing	2
Mercy PHO News	2
Need a <i>FREE</i> quote	2
ASR's New Kind of Health Plan	3
Welcome New Providers	3
Welcome New Employer Groups	3
Educational Opportunities	4

HCAP Partners with TransEngen to Offer a Technology Solution that Streamlines Medicaid and Charity Care Screening and Enrollment

With high unemployment and loss of health insurance being fueled by the struggling economy, combined with increased charity care scrutiny and stricter IRS reporting requirements, hospitals and health systems are more challenged than ever to manage their uninsured self-pay population. Lack of information at point of care, complex application procedures and confusing eligibility rules make it difficult to match patients to the right assistance programs. Increased enrollment volume due to Health Care Reform will only further stress hospital staff. With this in mind, HCAP is proud to introduce to our members, HelpEngen®, a systematic medical and financial assistance screening and enrollment solution powered by TransEngen.

HelpEngen is delivered as a web-based, Software as a Service (SaaS) application that enables financial counselors and other staff to screen uninsured self-pay patients from a single, patient-friendly guided interview for multiple benefit programs such as Medicaid, SCHIP and even hospital-specific charity care and discount programs. HelpEngen then populates the appropriate applications and

enrollment forms based on the programs the patient has been deemed eligible for, and prepares them for signature and submission. Dynamic interactive instructions and scripting are also provided within HelpEngen to simplify the process and enhance staff communication with patients.

HelpEngen stores the screening information as well as the completed application so that staff can access the information later to complete redeterminations or new applications if necessary. HelpEngen also provides reports to measure screening and application activity, staff productivity and workflow metrics. Data may be extracted to produce standard and custom user-defined reporting, and provide detailed reporting capturing charity care metrics.

Since its inception, HelpEngen has helped customers connect over 400,000 individuals to public benefit programs resulting in over \$400 million in public health program coverage. HelpEngen supports all aspects of the screening and enrollment process to maximize coverage for patients and minimize financial liability for providers.

If you are looking to reduce your uncompensated care, streamline the patient financial assistance process, meet charitable mission requirements, and be prepared to manage new healthcare reform opportunities/challenges, consider HelpEngen. And of course, as an HCAP member, you are eligible for preferred discount pricing. On average, customers using HelpEngen see a 4-to-1 return on their investment.

For more information, visit the following website: <http://www.helpengen.com/te/hcap/> or contact Lori Frey at (989) 891-8820

Special Offer for HCAP Members: Sign up before February 2011 and receive your first month of HelpEngen absolutely *FREE*.

HCAP Network Area



If you would like more information about HCAP please contact Lori Frey at (989) 891-8820 or by email at lfrey@hcccm.org

HCAP STAFF

- **Elizabeth Schnettler,**
President
- **Lori Frey,**
Account Executive &
Network Manager
- **Martha Rine,**
Administrative Services
Manager

*Become an HCAP
Participating Provider
Today!*

*Just call: (989) 891-8820
or visit our website at
www.myhcap.com and
"Contact Us"*

**Need a Free Quote
On Employer
OR
Individual
Healthcare Benefits?**

**Contact the HCAP
Office Today!!**

(989) 891-8820

Electronic Prescribing

According to a recent audit conducted by Surescripts, the nation's largest e-prescribing network, one of every three physicians, nurse practitioners and physician assistants in the United States is prescribing electronically. Michigan was found to be ranked second for e-prescribing activity behind Massachusetts. In 2009, the 5,618 physicians who were e-prescribing in Michigan accounted for nearly 20.3 million electronic prescription benefit requests. This activity represents an increase of approximately 11.9 million requests from 2008.

2010 is the final year that Medicare will incentivize e-prescribers with a 2.0% increase on their reimbursements. This incentive will be reduced to 1.0% for reporting years 2011 – 2012 and 0.5% for reporting year 2013. A reduction in payments schedule will begin in 2012 for those not e-prescribing. This schedule will begin with 1.0% reduction for 2012, increase to 1.5% in 2013, and 2.0% in 2014 and each subsequent year.

In addition to the Medicare incentive, there are benefits to e-prescribing around meeting Meaningful Use criteria. There are two core objectives relate to e-prescribing: mainte-

nance of an active medication list and the electronic transmission of prescriptions. There are also two objectives from the menu set that relate to e-prescribing: drug formulary checks and medication reconciliation.

Finally, e-prescribing will also provide opportunity to increase your semi-annual incentives distributed by CIPA through the BCBSM Physician Group Incentive Program (PGIP). For the first 6 months of 2010, CIPA awarded over \$17,800 to HCAP physicians for using e-prescribing technology and achieving Generic Dispensing Rate (GDR) targets. There was an additional \$22,300 to be earned by those not meeting the GDR targets or using e-prescribing.

If you're not currently part of the 33% who are e-prescribing and receiving financial incentives and would like to be, please contact Jeff McKenzie at CIPA to get started today. jmckenzie@medadvgrp.com 517-336-1400



Mercy Physician Community PHO Supporting PCMH Development

Mercy PHO has been actively working with their 31 primary care providers to help them achieve Patient Centered Medical Home (PCMH) designation from BCBSM. To date, seven practices (ten PCPs) have received designation. The PHO has assisted these practices with e-prescribing, patient registry implementation, self-management/behavior change coaching, and several other cultural changes required for PCMH. The PHO also has helped to develop a "chronic care travel team" consisting of three diabetes educators who spend time in the practice sites to work with patients who have diabetes, as well as other chronic conditions. (Because two of the diabetes educators are registered dieticians and one is an RN, they have been able to work with patients with

heart disease, chronic kidney disease, and asthma, just to name a few others.)

Mercy PHO holds monthly PCP managers/leads meetings where all PCP practices are invited. There the group reviews various PCPM requirements, works on many other quality initiatives, and does best practice sharing. Along with these meetings, the PHO has implemented a daily notification to its PCP practices of patients who have been discharged from St. Joseph Mercy Hospital's ER or inpatient services. This helps patients tremendously with transitions in care and care coordination. To add community resources to the care coordination picture, the PHO hosted a Community Speed Dat-

ing event on November 3, which connected PCP practices to eleven community agencies. The participants were able to get to know what each agency could provide in terms of resources for their patients. Also, referral feedback forms were distributed to all to use as a way of insuring that their patients did seek out the services. The event was well-received by all.

Mercy PHO continues to seek out creative ways to help support the PCMH development by their PCPs and also works with their Specialist practices to keep them in the know about current trends in healthcare reform.

Shared Funding ~ A New Kind of Health Plan

Shared-funding is a form of self-funding that functions very similarly to an insured policy, where the employer pays a set monthly premium. But unlike an insured policy, the employer retains any unspent claim funds. This approach allows even small employers to establish a monthly health plan budget and take advantage of the economic benefits of self-funding that many large employers have enjoyed for years. Here is how shared-funding works:

- An employer pays a set amount each month during the twelve-month plan year to fund the plan; the monthly payment is determined for each employer based on a thorough underwriting review.
- Part of the monthly payment is used to pay the fixed costs, e.g., stop-loss insurance premiums, administration fees, etc., and part is used to fund expected claims up to the employer's funding limit.
- Unlike insurance, if claims do not exceed the amount funded by the employer, the unspent claim funds are retained in the employer's claim account.
- In any given month, if actual claims exceed the cumulative amount funded by the employer for the year-to-date, stop-loss insurance funds the claims that exceed the employer's funding limit.

Claims Funding & Stop-Loss Coverage

Shared-funding offers an employer a potential savings if actual paid claims are less than the claim funding level. More importantly, stop-loss coverage protects the plan when cumulative claims exceed the employer's funding limit in any given month.

For example:

If the employer's monthly claim funding limit is \$40,000 a month and total claims payments for the first two months of the year total \$90,000, the stop-loss carrier will fund the \$10,000 in excess of the employer's funding limit.

- Through month three the employer will have funded a total of \$120,000 (i.e., three months at \$40,000). If total claims payments for the plan total only \$110,000, then \$10,000 will be returned to the stop-loss carrier.
- At the end of the plan year, the employer will have funded no more than the \$480,000 funding limit (i.e., 12 months at \$40,000). If claims payments are less than \$480,000, the employer will retain the funds. If claims exceed \$480,000, the stop-loss insurance carrier will have funded claims in excess of the employer's annual funding limit.

Plan Operation

A shared-funded plan is easy to set up and simple for the employer to operate. Each month, the employer makes a set payment and updates ASR Health Benefits on any plan enrollment changes that have occurred. The employer makes the set monthly payments to a bank account that is set up for the employer at the stop-loss insurance company's bank. This setup allows the insurer to promptly provide funds for any claims that might exceed the employer's claim funding limit. All claims are actually paid out of the employer account – even those that the stop-loss insurer funds. The stop-loss insurer transfers any funds that might be required to the employer's bank account.

ASR Health Benefits does the following:

- Bills the employer monthly
- Provides ID cards, a plan document,

and summary plan descriptions for employees

- Handles all claims processing and produces checks to pay claims
- Provides customer service for all inquires or questions from the covered persons, providers, and the employer's authorized staff
- Offers 24/7 access to detailed information about benefits, eligibility, and claim status on the ASR Health Benefits Website for covered persons and authorized staff

Advantages for Small Employers

Shared-funding is designed to allow employers with as few as 25 employees enrolled in their health plans to consider this unique self-funded approach. With shared-funding, a set monthly funding level is established that can be budgeted – much like a premium. This approach allows smaller businesses to take advantage of the economics of self-funding. For example, state premium taxes are not assessed on claim payments, and if claims do not reach the funding limit, the employer, rather than an insurance company, retains the excess funds. Often the fixed costs of operating a self-funded plan are lower than the fixed costs that are included in a group health insurance premium.

It is easy to obtain a shared-funding proposal. Simply call Lori at (989) 891-8820 or send her an e-mail today.

lfrey@hcecm.org

A special thanks to all HCAP providers for your participation in one of east central Michigan's largest PPO networks!

Welcome New Providers

All of us at HCAP would like to extend a warm welcome and thank you to the following providers who've joined the network in 2010: Associates In Eyecare, Back In Motion Rehabilitation LLC, Family Orthopedic Associates, Frankenmuth Family Chiropractic, Great Lakes Eye Institute, Kairos Healthcare Incorporated, Michigan Anesthesia Care One, Narayan MedTech, LLC, Professional Counseling Center, Scheurer Family Vision Center and approximately 140 individual physicians throughout the east central Michigan area.

Welcome!!

Welcome New Employer Groups

HCAP would like to welcome the following employer groups: **AutoWares, Covenant HealthCare and Huron Castings Corporate Services.**

Educational Opportunities ~ *get your continuing education credits here!*

Saginaw Valley State University (SVSU) is hosting its Second Annual Conference: **The Region's Health Care Quality: Evolving Systems for Excellence & Accountability.**

Featuring, Dr. Robert Janett, Medical Director, Mt. Auburn Cambridge Independent Practice Association & Dr. A. Mark Fendrick, Co-Director, Consortium for Health Outcomes Innovation and Cost Effectiveness Studies (CHOICES), University of Michigan.

This conference will take place Friday, **January 21, 2011.**

For more information contact: (989) 964-4143

The Hospital Council of East Central Michigan is hosting their annual Trustee Forum on the **Implications of Health Care Reform on the Delivery of Care.**

This year's speaker will be Mr. Jay Rosen, President & Founder of Health Management Associates and Managing Director of HMA Capital Partners.

The Forum will be held at the DoubleTree Hotel in Bay City, Michigan on **April 5, 2011.**

Continuing education units will be available. Please contact the HCECM for more details, (989) 891-8810.

ATTENTION NURSES

The ECMHF is in its last year for the Nurse Preceptor Initiative (NPI) Grant.

If you haven't attended an NPI course, please don't miss your chance.

There are only 3 more courses available for the 2011 fiscal year.

Visit the Hospital Council website at www.hcecm.org for a course near you!

