

CDC Prevention and Public Health Funds: Capacity Building Assistance to Strengthen Public Health Immunization Infrastructure and Performance

Public Health Reimbursement Grant (7/1/12-8/31/14)

The Washington State Department of Health (DOH) and Local Health Jurisdictions (LHJs) will work together to increase public health billing to private insurers by 33% by assuring:

- LHJs understand how revenue may be generated by billing private health insurance for services they provide.
- LHJs receive training and technical assistance to help them put billing practices in place.
- LHJs have access to resources to assist with overcoming barriers to billing.

Population served

The Washington State Department of Health, thirty five Local Health Jurisdictions and Washington residents receiving services in local health departments.

Background

Seventy percent of U.S. health departments do not bill private health insurance for vaccine services. This is potential revenue that could be used to support, improve and expand local vaccine services for both children and adults. The Center for Disease Control and Prevention (CDC) has given more than \$20 million dollars to grantees across the nation to assist health departments with billing for immunization services.

In 2010 and 2011, the department worked with five lead LHJs to identify and address barriers to public health billing private health insurance. They addressed processes and barriers that most commonly apply to public health agencies. They created a tool called *The Washington State Local Health Jurisdiction Immunization Billing Resource Guide*. It includes guidance, tools, resources and information from LHJ staff with billing expertise.

Methods

Five LHJs with billing expertise will mentor LHJs who don't bill for services or who need help with billing. Their goal will be to increase public health billing of private insurance for services they provide. The grant coordinator works with mentors by providing billing and coding guidance, resources, and technical assistance. Training materials and presentations will be used to support the completion of a cost benefit assessment and help put billing activities into place. DOH provides LHJs funding to take part in billing and grant activities. We will create resources and materials to support technical assistance. We will use phone, internet, webpage, listserv, fax, web conferencing and in-person meetings to plan, train, develop tools and distribute resources. DOH and LHJs will work together to determine the training content and schedule. We will work with the 30 LHJs that are new to billing to complete a cost benefit assessment, participate in training, and implement new billing practices.

Plan

Funds will be dispersed via contracts. (\$704,500)

Mentors: LHJ mentors receive funding to help LHJs put billing practices into place.

11/1/12-8/31/14

- Develop training and materials to support LHJ related billing activities.
- Provide training, technical assistance and guidance.
- Act as a mentor to participating LHJs.
- Share resources, best practices and lessons learned.
- Complete and submit progress and data reports according to the grant requirements.

Phase I: LHJs receive funding to participate in a fiscal assessment and training. (*Up to \$2,500 per LHJ*)

1/1/13-6/30/13 (\$107,500)

- Complete a cost benefits assessment.
- Take part in all billing training sessions.

Phase II: LHJs put billing practices in place in their clinics. (*\$1,000 minimum per LHJ*)

7/1/13-7/31/14 Needs and resources will vary amongst LHJs. (\$427,000)

- Work with mentors to overcome barriers to billing private insurance plans.
- Bill private insurance for vaccine services with or without a contract.
- Submit monthly progress reports and data based on revenue.
 - Amount from administration fees
 - Vaccines
 - Public/Private payer

DOH staff provides consultation, technical assistance and work with stakeholders.

- Guide and assist mentors.
- Provide assistance and coordination on coding and billing.
- Identify and work with FQHC, RHC and tribal providers.
- Discuss LHJ billing and payment structure with other DOH programs that partner with public health departments to provide services. (Such as Family Planning, STD, Viral Hepatitis, etc.)
- Research and discuss billing solution options through the IIS or a clearinghouse.
- Work with stakeholders on policy issues. (Such as HIPAA, contracts, universal provider)

Expected Outcomes

General: LHJs support their peers to improve their ability to bill private insurance.

Measureable:

100% of LHJs submit a cost benefit assessment.

100% of LHJs are trained on billing, contracting, credentialing and coding claims.

Washington has a 33% increase in the number of LHJs billing for vaccine services.

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