

Claims Department

The Claims Department's focus during the past year was to increase Provider satisfaction by:

- **Monitoring** and improving quality control measures with the addition of a Claims Trainer and a Quality Coordinator to the Claims Staff.
- **Providing** useful information and billing tips through "Claims Corner" articles in the monthly Provider Bulletin and through participation in Billing Workshops.
- **Creating** useful reports for our Providers to educate them on solutions to their unique claim problems.
- **Increasing** one-on-one Provider visits with their Claim Representative.
- **Continuing** our goal of system automation and fewer manual reviews.

In applying automated reviews and decreasing claim denials through Provider education, more time is available for our Claim Representatives to work closely with our Providers to facilitate cleaner claims, faster payment and improve service.

Decision Support

Organize: Investment in decision support systems has further strengthened fact-based decision-making and organizational efficiency. To achieve these efficiencies, information systems have been refined and training increased to increase data quality and broaden staffs' direct access to SBRHA's data warehouse. Additional investment is planned for the probable implementation of an intuitive, self-service, point-and-click application that will make most industry standard key performance indicators available to staff.

Improve: Provider profiling initiatives to inform Primary Care Providers (PCPs) of opportunities for improvement. To implement SBRHA's first comprehensive PCP Profiling initiative, a sophisticated profiling tool was developed to enable quality management staff to profile performance for SBRHA PCPs as measured by a broad range of industry-standard measures of managed care quality. Profiles were distributed to PCPs; and with high-volume PCPs, discussed to explore strategies to further improve.

Improve: The Authority once again successfully reported independently-audited performance data to the National Committee for Quality Assurance, an independent, not-for-profit organization dedicated to measuring the quality of America's health care. In aggregate, the Authority continued its year-over-year trend of performance improvement. Based on exceptional overall results, the Authority is expected to maintain a top ranking among Medical plans. Yet staff are, nevertheless, resolved to improve some important aspects of care where SBRHA fares poorly relative to benchmarks, such as appropriate prescribing of antibiotics and utilization of preventive medicine evaluations.



Left to right:
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