

## LGFCU Excellence in Innovation Award Project Evaluation

<b>Project ID</b>	GG-3
<b>Title of Program</b>	Gaston Department of Health and Human Services-ACCESS Central Transportation
<b>Program Category</b>	General Government
<b>Submission Date</b>	6/24/2016 3:48:39 PM
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<b>Implementation Date</b>	1/1/2015
<b>FLSA Designation</b>	Both (if applicable to a team)
<b>Project Team Members</b>	Michael Coone, Tina Stogner, Jerrie Frazier and the NEMT staff, Rebecca Lamphier, Cheree Wilson, Olivia Henderson and ACCESS staff.

### **Description of Productivity Improvement**

ACCESS Central Transportation provides transportation to citizens of Gaston County who are disabled, seniors, and veterans. In July of 2014 ACCESS moved from its own stand alone department to the Gaston County Department of Health and Human Services (DHHS). After careful examination of the billing system ACCESS and DHHS staff determined that there were areas that were creating significant funding loss due to disallowed billing. By decreasing disallowable billing ACCESS was able to provide a higher level of service, delivered at a lower cost by implementing more accurate and efficient billing practice. From December 2014-April 2016 disallowed billing was decreased from 28.19% to 0.98%, resulting in a cost savings that would save Gaston County more than \$150,000 per year. During this time period ACCESS was able to provide better customer services and increase the number of requests for transportation services.

### **Description of why this project was initiated**

Staff determined that ACCESS was losing upwards of \$15,940.55 per month due to disallowed billing.

**Quantifiable results (sustainability, cost savings, cost avoidance and/or a higher level of service).**

**Indication of what resources were used and what was done with any accrued time savings**

This project was a coordinated effort between the DHHS Non-Emergency Medical Transportation (NEMT) staff and ACCESS staff. The collaboration resulted in an average cost savings of \$6,406 per month in the first year (2015) and \$10,345 per month in the second year (2016) of the project compared to 2014 numbers. This savings was accomplished utilizing resources from the two separate programs to review data and identify the causes for disallowed billing. The group determined that the two primary causes that contributed to disallowed billing were: failure to verify attendance to Medicaid funded appointment and lack of prior authorization to the Medicaid appointment. The group also recognized that billing for services was processed long after the services were provided (up to six months). This wouldn't allow staff to solve billing issues in real time. At this point the NEMT staff worked diligently to catch up billing so that problems from the previous billing cycle could be identified. ACCESS drivers were able to improve the frequency of obtaining the Medicaid verification forms at the time of transport. This allowed NEMT staff to process billing faster and relay issues to ACCESS staff. By 2015, drivers were obtaining 40% of the needed forms, compared to 27% in 2014. Disallowable billing was tracked on spreadsheets and sorted by location and individual. Individuals and locations with significant disallowable billing were investigated and followed up on monthly. This ensured that staff could verify that clients were actually using the ACCESS resource to go to allowable medical appointments. During this same time period services utilization increased by 79% from \$53,492 in August 2014 to \$95,909 in August 2015, likely due to improved efficiencies and customer service practices. Improving customer service during this period was also a strategic focus. Coordinated complaint tracking with NEMT and DHHS Adult Services was expanded. Staff recorded complaints into a spreadsheet, complaints were tracked by driver, passenger and location. Complaints were followed up on by the ACCESS transportation coordinator. The number of complaints that were elevated to the DHHS director, the county manager, and commissioners decreased. During this time the number of calls about transportation increased from 818 in 2014 to 1884 in 2015. We believe the increased demand is related to improved customer service and efficiencies. ACCESS also switched to propane fuel during this time. Most vehicles used propane in 2015, decreasing the amount of carbon dioxide released into the community and producing a significant cost savings.

This project has continued to be sustainable, and is a strong example of how teamwork can help decrease costs and improve service. This disallowable billing program continues to save an average of \$10,345 per month for Gaston County.

**Other descriptive information**

Please see additional descriptive information in the email dated 6/23/16 from Michael Coone to Matt Gunnet.

See expanded description of the disallowed initiative and savings associated with transition to propane fuel in attachment sent to Matt Gunnet on 6/24/16.