Welcome to:

Partnerships to Enhance Clinic Sustainability

We will begin in a few minutes. There will be no sound until the webinar starts.
Partnerships to Enhance Clinic Sustainability

Presented by: Debora Wood, MBA, PT
1. Do you bill for services using an EPM and/or EHR?

- [ ] Yes
- [ ] No
2. Would you like to develop a partnership with another health care provider?

☐ Yes

☐ No
3. Have you ever tried to form a partnership with another organization and been unsuccessful?

- Yes
- No
Learning Objectives

1. Six types of partnerships that enhance clinic sustainability
2. Key attributes of each type of partnership
3. Research strategies for identifying potential partners
4. How to prepare for a successful partner meeting
Why consider a partnership?

1. Increase patient volume

2. Improve third-party payer billing

3. Decrease clinic costs
6 types of partnerships to consider

1. Purchase/share EHR and PMS
2. Shared billing system for a group of clinics
3. Co-location
4. Shared provider
5. Referral agreement
6. Subcontract services
Purchase/share EHR and PMS

**Example 1:** Purchase between several FP grantees

**Example 2:** Contract with another provider that has implemented EHR and PMS for...

- Use their system
- Partner does your billing
- Training only
Shared billing system for group of clinics

- Define the group
- Develop an MOU
- Contract with billing company
Shared billing system for group of clinics, cont.

- Example: Clinics networked together to gain contract billing company flexibility

**Benefits**

- Billing functions done by an outsourced billing company
- Additional TPP revenue

**Considerations**

- TPP contract arrangements – group or individual?
- RCM processes
Co-location

• Share space
• Share equipment and clerical/medical support staff
• Examples
Co-location, cont.

**Benefits**
- Increase service hours and/or patients
- Expand to new geography
- Shared facility operations costs

**Considerations**
- Retain current clients
- How to share space
- Supplies, equipment, medications, etc.
Shared provider
Example: Joint STD/FP clinic “rents” time from OB/GYN practice

Benefits
• Recover costs associated with an underutilized provider
• Cost-effective way to acquire clinician services
• Minimal time and expertise to implement

Considerations
• Agree on productivity benchmarks
• Credentialing responsibilities
• Still need TPP contracts
Referral agreement

- Cross referrals
- One-sided
Referral agreement, cont.

- Example: FQHC and STD/FP clinic
  - Focused on a particular population: teens

Considerations
- Assure billing and services are not duplicated
- Expedited appointments
- Data Exchange
Subcontract services

Agency
  - Admin
  - Grant Oversight

Partner
  - Patients
  - Funding
Subcontract services, cont.

- Example: HD subcontracts STD services to a FP clinic in a high-need service area

**Benefits**
- Increased revenue and patients for one partner
- Improved care
- Reduced costs
- Service expansion

**Considerations**
- Location
- Funders
- Reporting
Questions?

Click the chat button on the upper right corner

The chat box will appear on the lower right corner

Send chats to “all panelists”
What partner/partnership is best for you?

• Know your state information
• Know your organization
• Identify what you offer and what you need
• Identify potential partners and obtain key information about them
What’s happening in your state?

- Medicaid
- Insurance exchanges
- Private third-party payers
Know your organization

- Strengths and weaknesses
- Financial information
- Clinical measures
What do you offer? What do you need?

*See stdtac.org under “What’s New?”

- Infrastructure
- Provider expertise
- Clinic flow
- Quality assurance
- Billing infrastructure
Identifying potential partners

1. Relationships determine results
2. Gather information
3. Frame the partnership
Preparing for the partner meeting

• Elevator pitch
• Gather information
• Share your idea
• Keep an open mind
Regardless of the partnership type...

✓ Regular **assessments** of the partnership

✓ Agree upon and utilize **key metrics** to evaluate the partnership

✓ Consider **contract amendment** provisions

✓ Assure both parties can **legally end** the agreement if necessary

“Looks like he used the escape clause.”
Considerations for contracts

- Advertising costs
- Terms to assure clients remain in each distinct practice
- HIPAA
- Data sharing/reporting
- Licensing
Go to stdtac.org to access the billing toolkit and request training and technical assistance.

Resources

STD BILLING AND REIMBURSEMENT TOOLKIT

MODULE 1
Before You Begin

MODULE 2
Develop Billing Systems

MODULE 3
Manage Revenue Cycle

MODULE 4
Initiate Contract Process

MODULE 5
Enhance Coding Capacity

MODULE 6
Access More Resources

With the passage of the Patient Protection and Affordable Care Act (ACA), participation in third-party billing is increasingly important. Many previously uninsured Americans will have access to health insurance coverage. Traditional safety net providers, such as STD clinics, which have historically provided free or low-cost services through public funding, are facing financial challenges due to decreases in public health STD funds. Implementing or expanding third-party billing is a way to diversify revenue streams, ensure access to care, and potentially expand services to populations who need them the most.

This toolkit is designed to help publicly-funded STD clinics and public health laboratories make decisions about whether to bill, and how to develop billing systems, manage revenue cycles, initiate contracts, and enhance coding capacity. Modules are organized by topic and may be used sequentially or individually. *Acknowledgements
More resources

HEDIS measures:

Medicaid information:
http://www.medicaid.gov/medicaid-chip-program-information/by-state/by-state.html
THANK YOU!

Thank you!

Questions?
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Thank you for attending this webinar!

Please don’t forget to complete the evaluation that will pop up on your screen once you close WebEx.

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