

Kaizen Event Report Out
Ohio Department of Mental Health
May 20 – 24, 2013

HEALTH HOME ROADMAP PROCESS

“H³”

HEALTH HOME HEROS



TEAM MEMBERS

- Jody Lynch
- Afet Kilinc
- Matthew Loncaric
- Cheryl Reed
- Alan Rogers
- Rob Husted
- Gina McDonald
- Sivakumar Raju
- Mary Haller
- Peggy Smith
- Teresa Lampl
- Janel Pequignot
- Lynne Lyon
- Kathy Yokum
- Elisha Ehnes

STAKEHOLDERS

- Clients with SPMI
- Community Behavioral Health Centers
- State agency staff charged with planning and implementing the health home service
- OHT
- Ohio Taxpayers
- Stakeholder Trade Associations

BACKGROUND

- Develop an improved process for information exchange and management of health home providers and client enrollment.



SCOPE OF EVENT

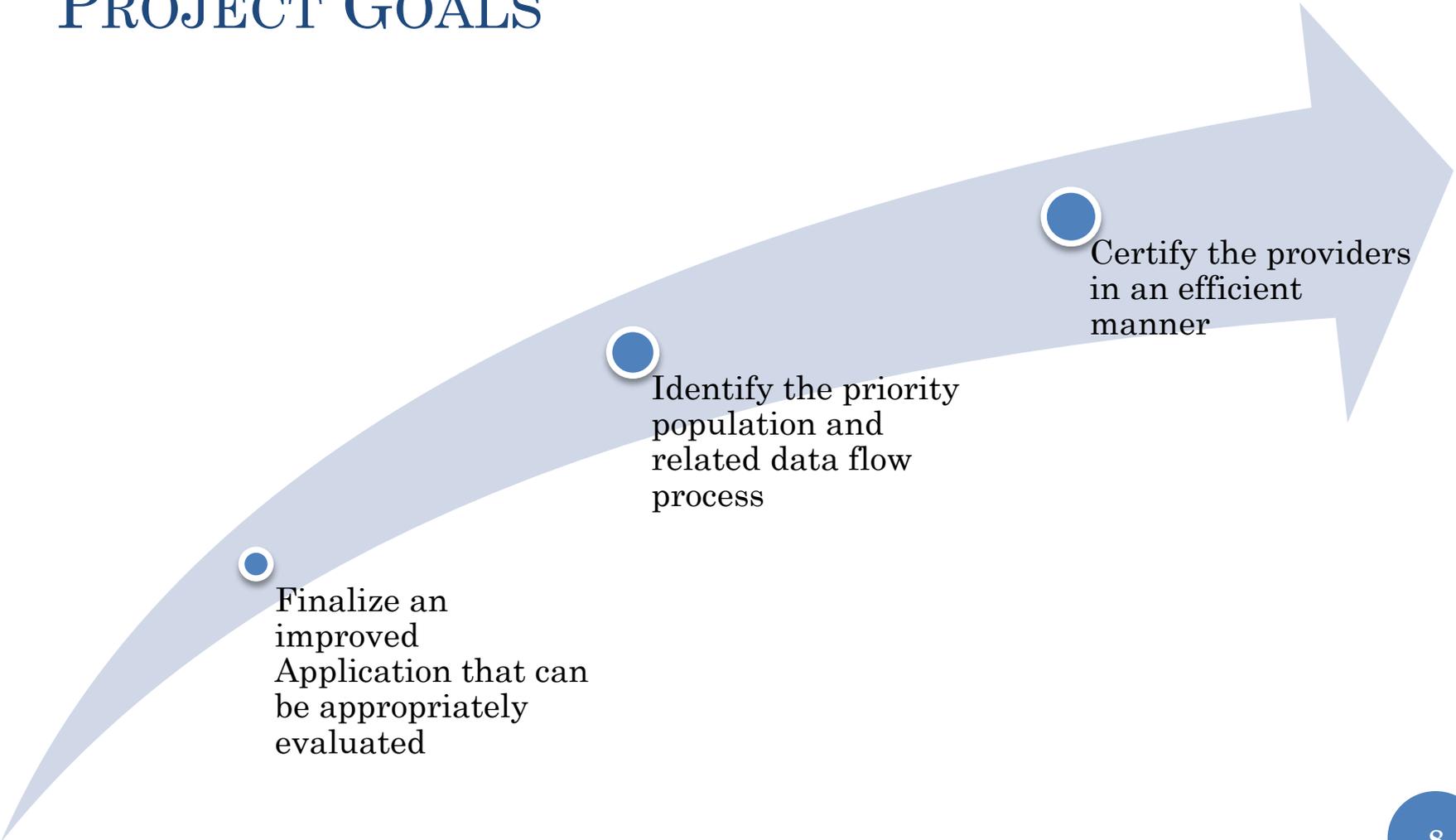
- Develop a streamlined and sustainable information exchange process that begins when a CBHC submits a pre-application/notification of intent to apply and ends when health home processes are discontinued for dis-enrolled clients.
 - *Note: event scope does not include claims or performance measures data submission.*
- Scope includes internal process flow between
 - ODMH offices
 - ODMH and Medicaid/HP

OUT OF SCOPE

- No additional staff
- No additional money
- No IT solutions until the process is improved
- No changes to laws or labor contracts
- No one loses their job because of the Kaizen event, although duties may be modified
- No legislative changes or changes to collective bargaining agreements*
- Integrated Care Delivery System (ICDS)
- Interface with Medicaid Managed Care (MCP)
- Other

**Changes to OAC are anticipated.*

PROJECT GOALS



Finalize an improved Application that can be appropriately evaluated

Identify the priority population and related data flow process

Certify the providers in an efficient manner

KAIZEN DEFINED

- Customer Focused
- Work level team
- One week
- Quick and Simple-action first
- Necessary resources available right away
- Immediate results, new process functioning by end of next week



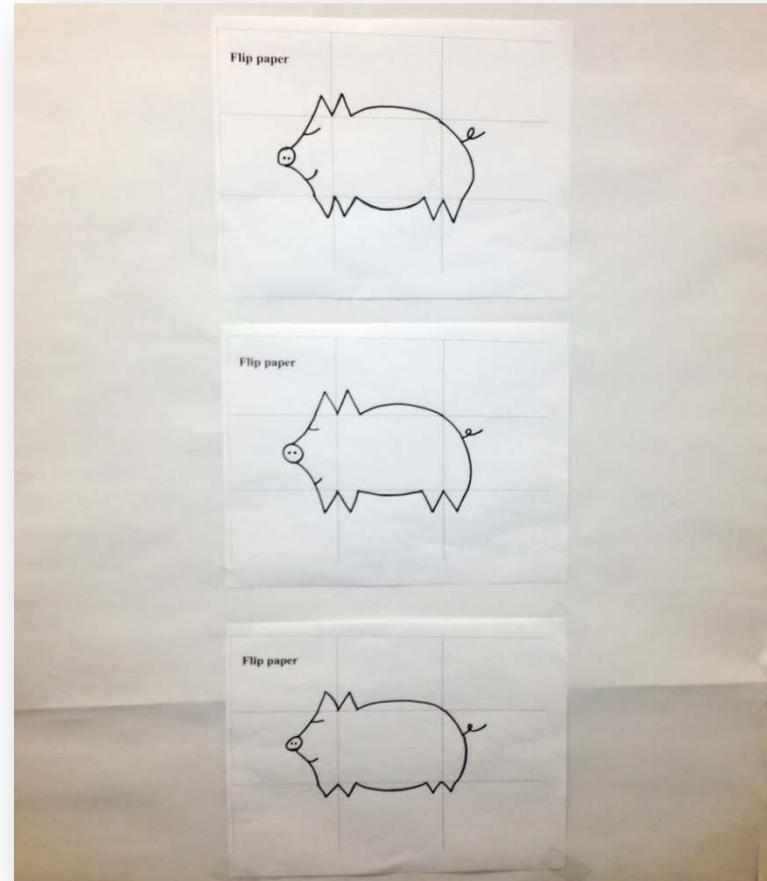
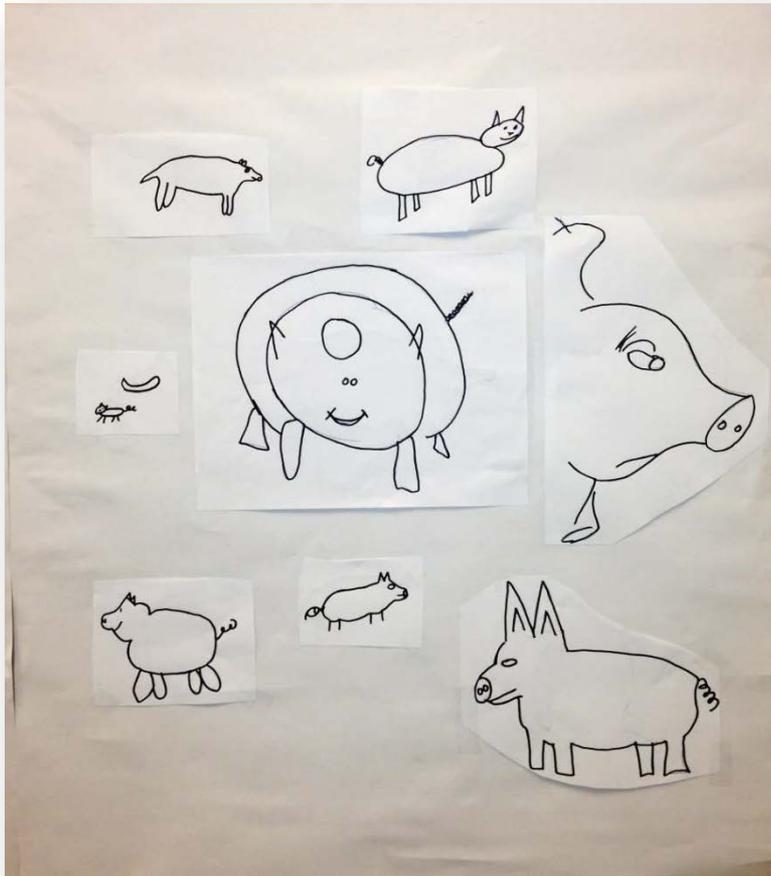
THE KAIZEN APPROACH

Team-based energy and creativity drives immediate process improvement

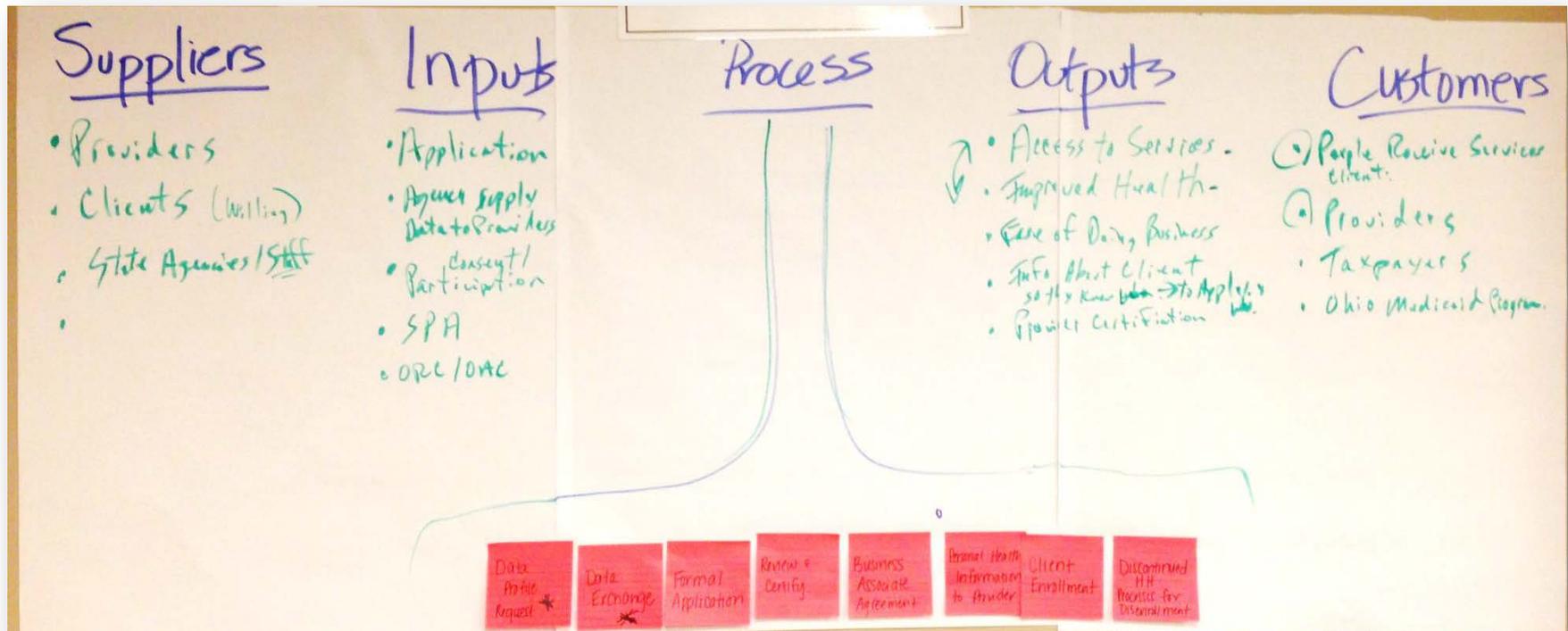
DAY 1	DAY 2	DAY 3	DAY 4	DAY 5
<p>Day of Learning and Level Setting:</p> <p>Getting everyone of the same page</p>	<p>Day of Discovery:</p> <p>Making the invisible visible</p>	<p>Day of Improvement:</p> <p>Creating the new process</p>	<p>Day of Design:</p> <p>Implementation & action planning</p>	<p>Day of Fine Tuning & Communication:</p> <p>Celebration & sharing results</p>

At the end of the week, each Kaizen team has designed dramatic operational improvements and plans for 30-60-90 day follow ups

STANDARDIZATION



HIGH LEVEL PROCESS - SIPOC

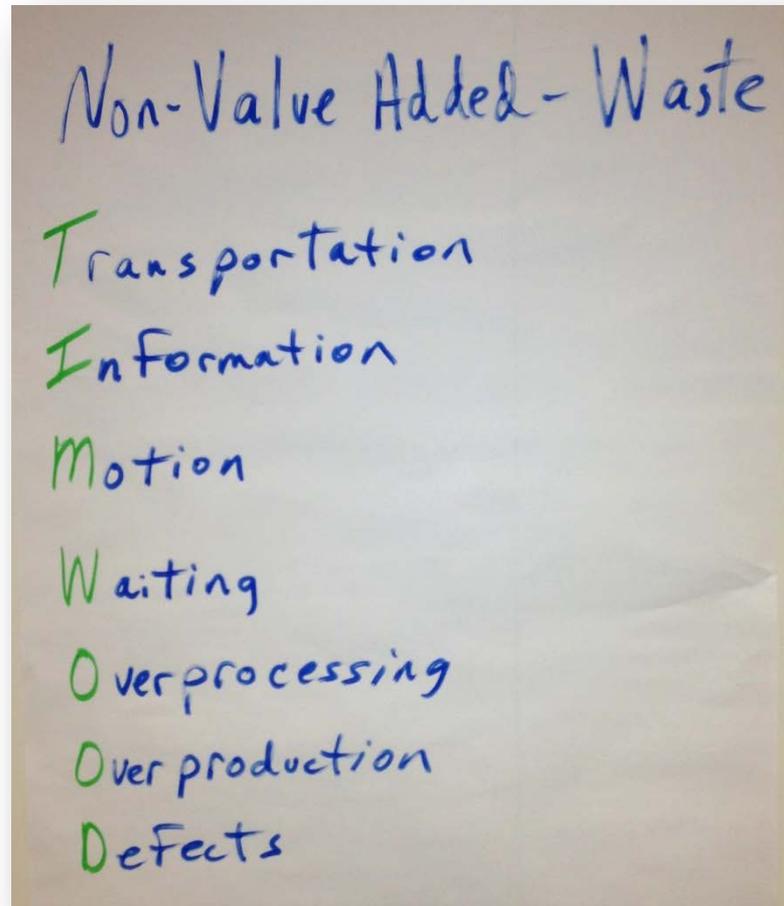


CURRENT STATE PROCESS MAP



CURRENT STATE PROCESS MAP

- Too many steps
- Too many handoffs
- Too many delays
- Too many decisions
- Too much TIM WOOD

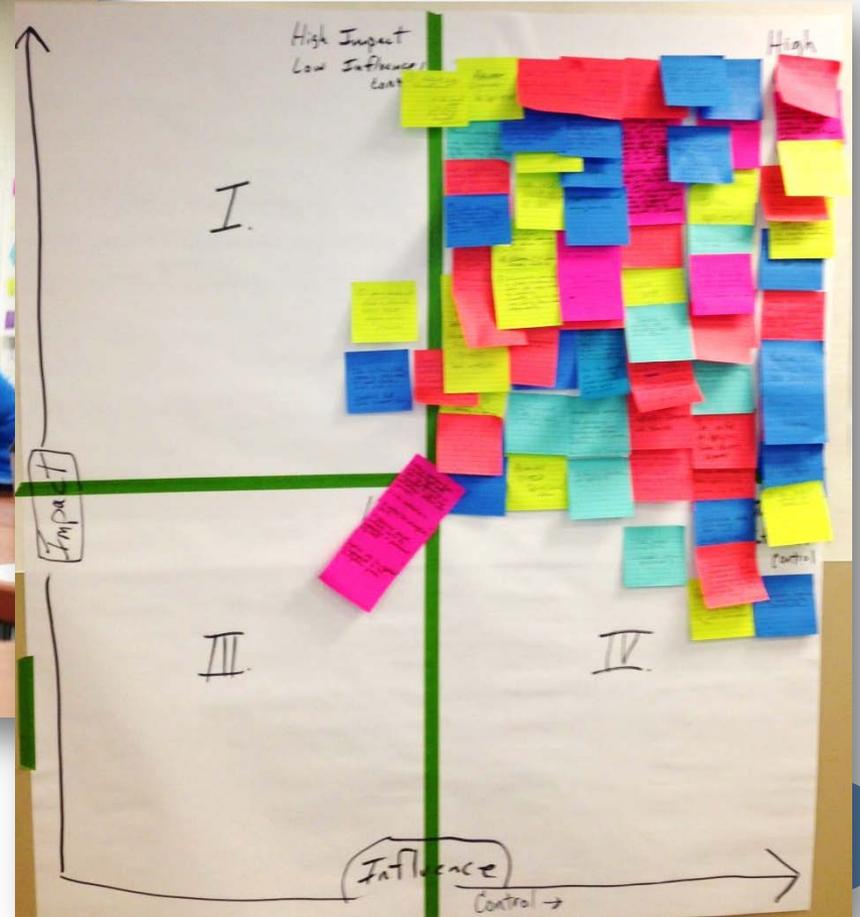


TEAM BRAINSTORMING

- Generated 87 improvement ideas
- Categorized ideas based on “Impact” and “Control”



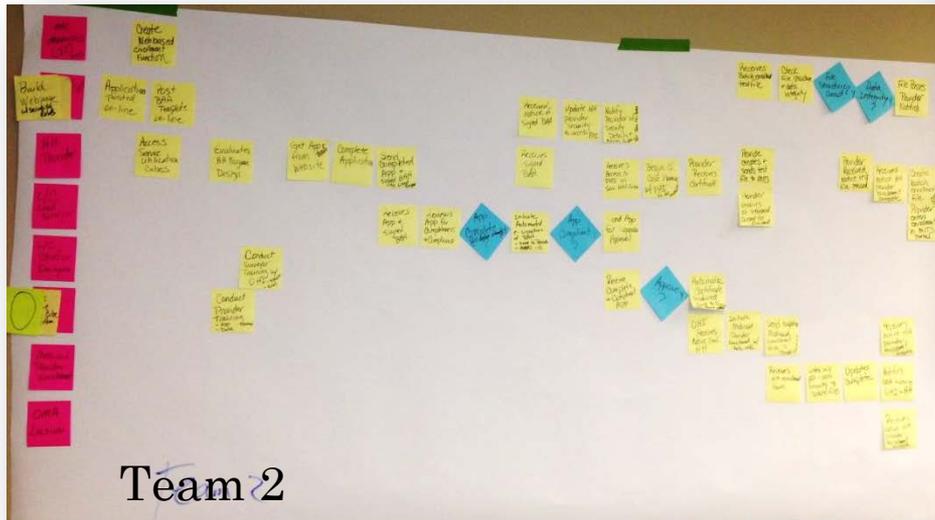
TEAM BRAINSTORMING



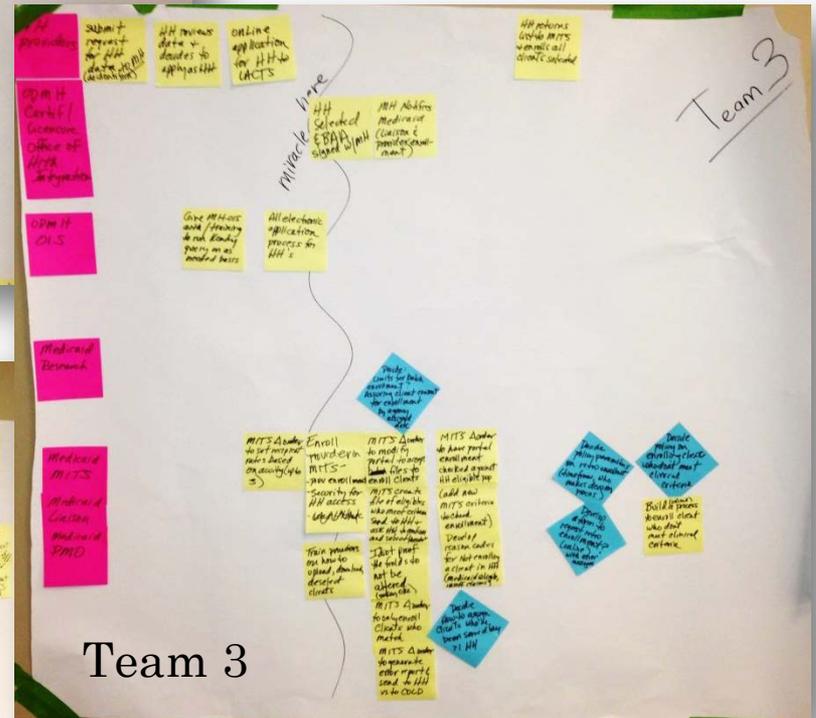
CLEAN SHEET REDESIGN



Team 1



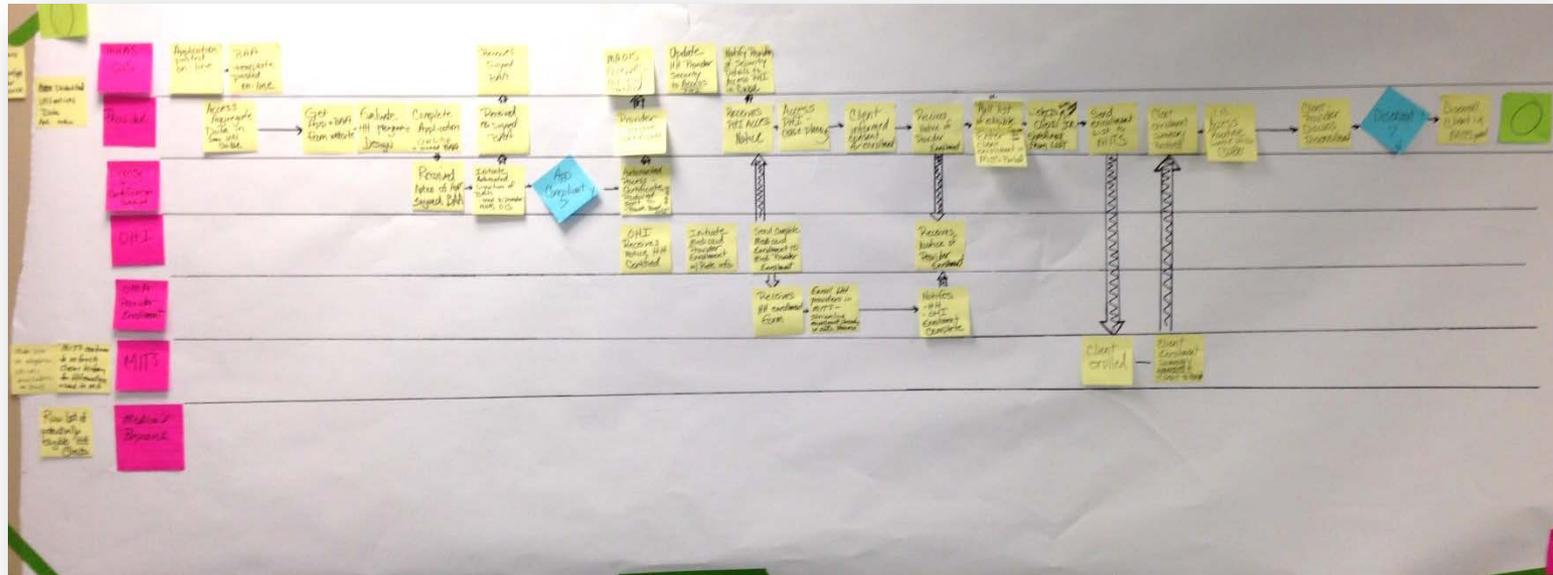
Team 2



Team 3

Team 3

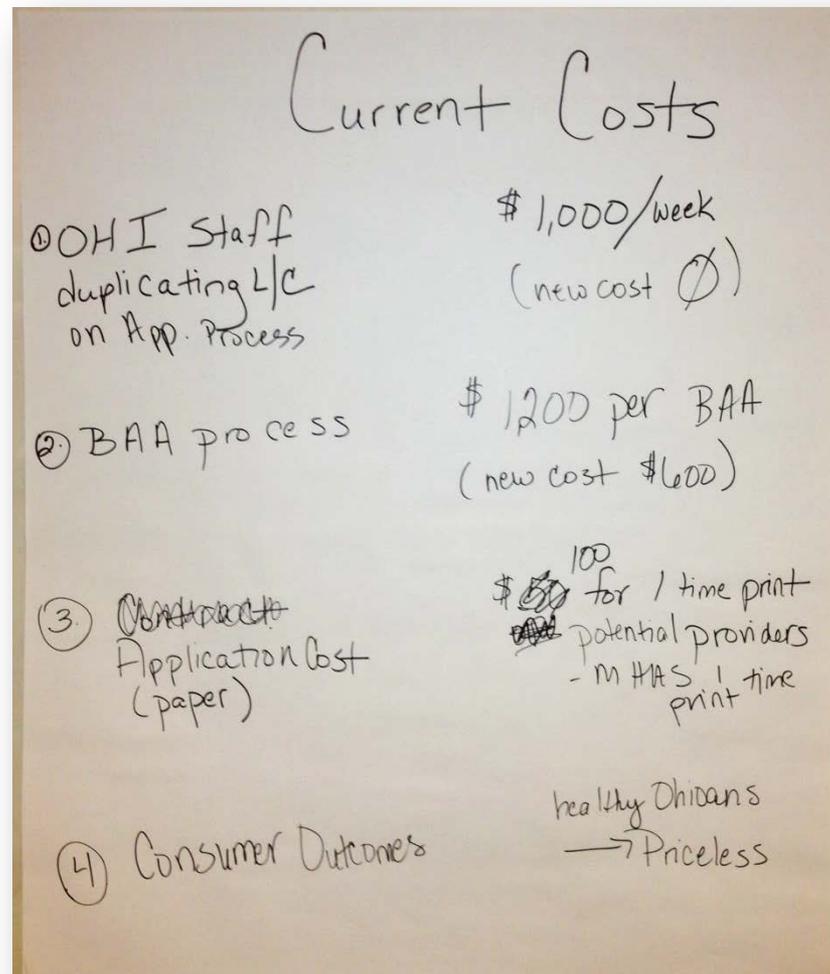
FUTURE STATE PROCESS MAP



SCORECARD

Measure	Current Level	NEW	Change
Process Steps	191	43	77%
Decision Points	18	2	89%
Points of Waste	54	0	100%
Process Lead Time	120 – 213 Days	13-36 Days	83%

COST SAVINGS



MORE RESULTS

- Improved service
- More accountability
- Improved application process
- Faster processing
- Better use of technology
- Better utilization of staff
- Standardization of forms
- Uniform process



IMPROVEMENT SUMMARY

Current Key Issues

Improved Health Home Certification Application

Simplified Health Home Certification Process

Streamlined Health Home Client Enrollment

How We Improved

Eliminated redundancies, criteria, and improved ease of use

Created a more efficient review process with a single point of contact

Developed functionality for providers to select clients for enrollment online

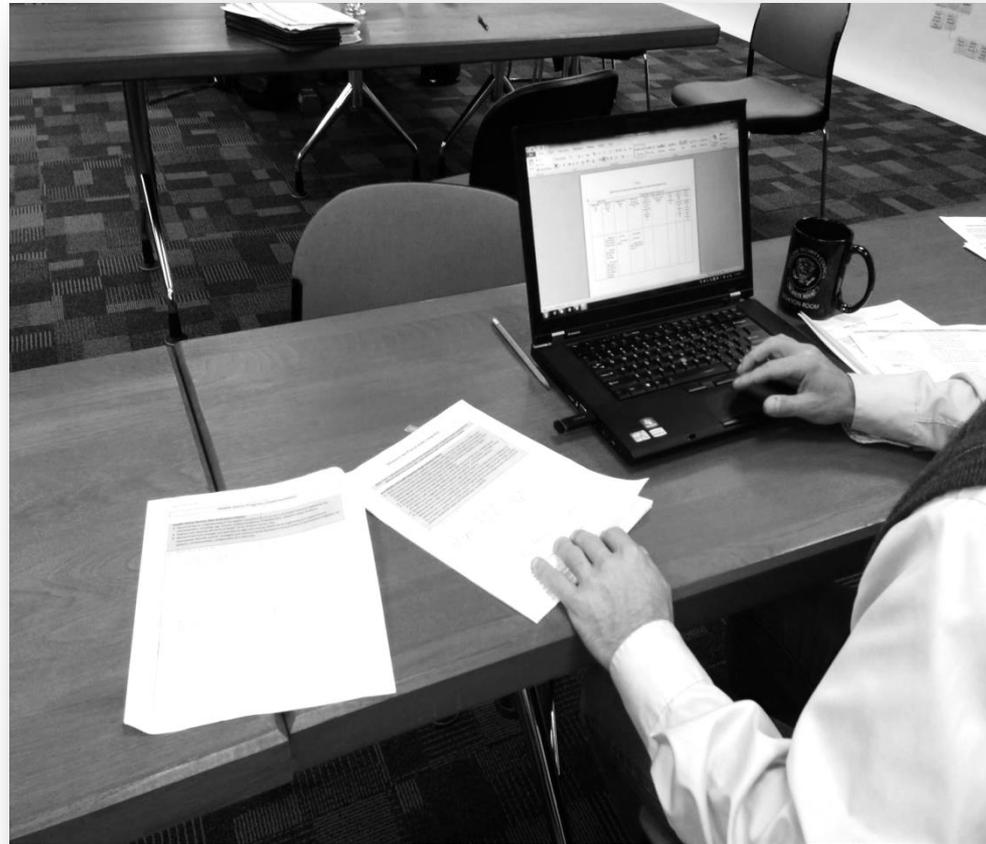
IMPLEMENTATION PLANS

- Data Exchange and Information Technology Plan
- Application and Evaluation Plan
- Training Plan
- Communication Plan
- Timeline Plan

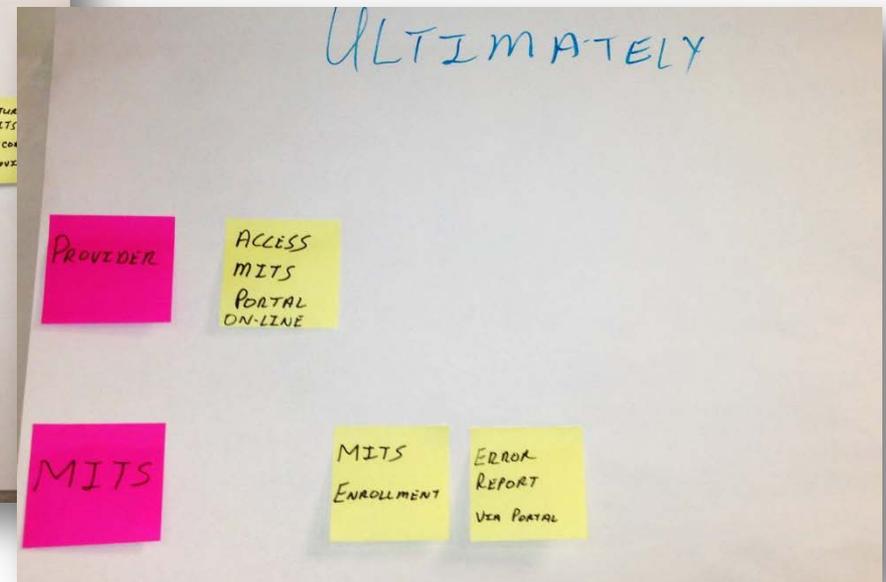
APPLICATION AND EVALUATION PLAN

**Current App:
21 pages**

**Future App:
10 pages!!!**



DATA EXCHANGE AND INFORMATION TECHNOLOGY PLAN



FUTURE STATE

- Anticipate an online certification application
- BI strategy will be developed to provide comprehensive reporting for the reports
- Mass Client enrollment would be handled in MITs
- Logic will be built behind the MITs portal and batch enrollment to validate client meet state defined target criteria

IT ASSUMPTIONS/RISKS

Assumptions:

- This is put in place to accommodate business need and timeframes
- Aggressive timeframe, work must closely managed
- Target population will be in place not later than June 15
- Target population updated on a timely basis
- Infrastructure exist to support design
- Key participants for all areas will be available and commit to actively participate

Risks:

- Moving data from a system of record for processing in a different system
- Requires data interface with MITs that will need to be monitored and supported daily

IT MILESTONES

- De-identified data to providers not later than June 30
- Target population layout finalized July 15
- Provider Access to PHI data September 15
- Provider Batch enrollment functionality October 1
- Provider Access to Claims utilization history files November 1

COMMUNICATION PLAN

Communication
Action Register

What	Who	When
- Rules Filed w/ JCARR	Janel/Mary	7/17/13
- Rules Final Filed	Janel/Mary	9/20/13
- SPA filed w/ CMS + posted	Lynne	7/2/13
- SPA approved by CMS	Lynne/Matt	10/1/13

Communication
Action Register

What	Who	When
- New HIT process + changes	Angie/Jon	5/30/13
- New App + BAA available (w/ Training Date)	Angie	6/3/13
- Update LC Data Management of Process	Janel	6/3/13
- Revised Rules Posted for CSI	Janel/Mary	6/3/13
- Revised Performance Measures Available	Afet/Jon	6/17/13
- Communicate Date for Provider Training	Jody	6/21/13
- Communicate Date for Client Enrollment Training	Jody	7/26/13

TRAINING PLAN

Action Registers
Training
(Non-IT)

What	Who	When
- Develop Provider Training on App.	Angie / Janel	6/7/13
- Training for Provider on App	Angie / Janel	6/17/13
- Develop Surveyor Training	Janel	6/7/13
- Train Surveyors	Janel	6/17/13
- Revise Provider Operation Training	Jody	7/1/13
- Provider Training on Operations	Jody	7/21/13
- Develop Provider Training on Enrollment	Jody / Mary (MITS)	8/12/13
- Provider Training on Client Enrollment	Jody / Mary (MITS)	8/26/13

METRICS

METRICS

#1

- # of Providers/People access Aggregate Data
- # of Providers Submitted App.
- # of Providers Certified
 - # Days between submission + first contact w/ lead surgeon
- # of Days from submission to Certification
- # of Providers accessed PHI Data
- # of Consumers Enrolled
- Types of Errors in Client Enrollment
Volume

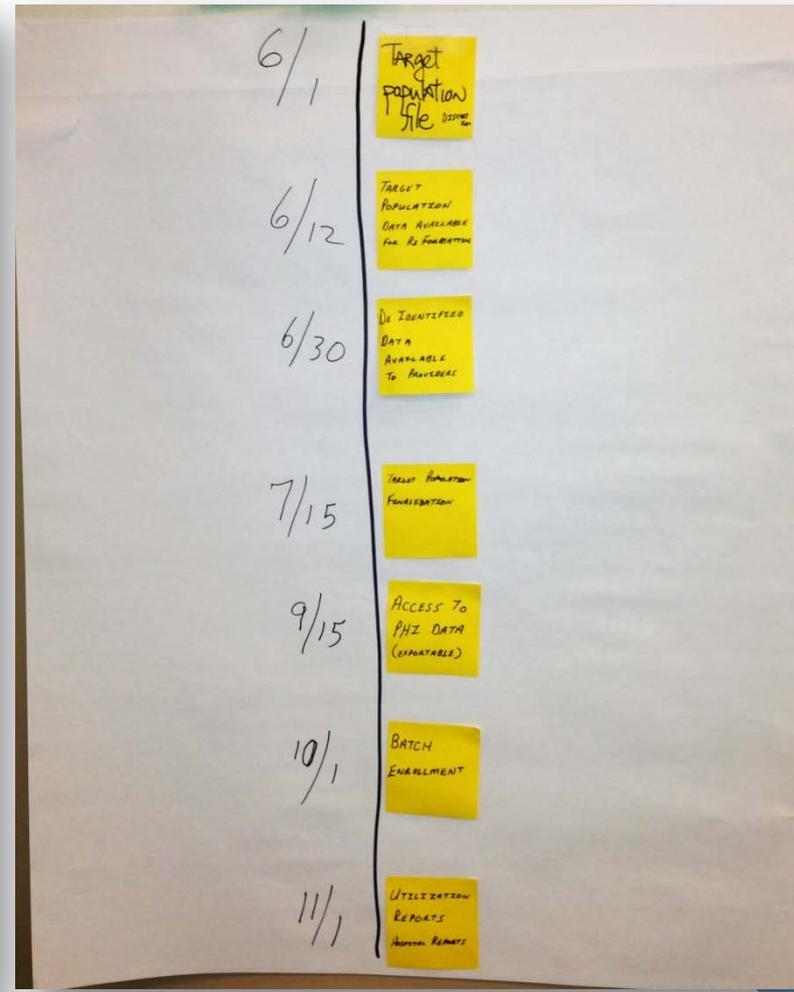
METRICS-2

- # of Providers withdraw App.
- Type of Application Errors
- # of Providers attending all trainings
- Achievement of Timelines & Action Registeries
- # of days from App. submission to BAA.
- # of IT related TA requests/complaints by steps in the Process
 - Accessing web page
 - Accessing De-identified Data

#3

- Accessing PHI Data
- Client Enrollment File
- Client Enrollment in MITS
- Timeliness of Response
- Getting Error reports

TIMELINE PLAN



WHAT BEGINS TUESDAY?

- Finalize BAA template
- Finalize App
- Communicate new process/changes
- Establish rate methodology
- Draft rule changes for Medicaid and MHAS
- Finalize remaining policy decisions

SPECIAL *THANKS* TO...

Senior Leadership:

- Director Tracy Plouck, Director John McCarthy

Sponsor:

- Angie Bergefurd, Jon Barley

Team Leader:

- Jody Lynch

Subject Matter Experts:

- Michaela Peterson, Janice Franke , Marc Baumgarten, Shawn Shelstad, Kendall Fells, Joe Gaietto, Rose Tolliver, Dr. Hurst, Rick Tully
- **Health Management Associates (HMA):** Alicia Smith, Lynn Dierker
- **Medicaid:** Stephanie Ward, Robyn Colby, Kendy Markman, Dr. Mary Applegate
- **HP:** Tina Miglia