

# Veterans Administration Reconciliation Status and Report

April 4, 2018



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## Objectives

*(p. 1)*

1. Perform a thorough reconciliation
2. Resolve outstanding EMS claims from July 2014 to September 2017
3. Understand/improve processes

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## Background

*(p. 2)*

- Review was ongoing from October 20, 2017 to January 19, 2018
- Focused on ambulance transports from July 1, 2014 to September 30, 2017
- County EMS with Veterans Administration

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## Introduction

*(p. 5)*

- EMS transports 42,000 per year; 1,100 are for VA
- VA changed process in March 2014 *(p. 28)*
- COMCARE took over EMS billing in July 2014
- Issue with timely payment from VA *(p. 29)*
  - Congressman Yoder letter, May 2016 *(p. 31)*
  - Commissioner Dennis statement from bench, 2017 *(p. 36)*

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## Processes – EMS

(p. 6)

- Respond to calls and provide transport
- Paramedics create necessary paperwork
- Review by EMS administration for Quality Assurance
- Submit to COMCARE for billing
  - Beneficiary travel (to/from VA)
  - Mill bill (to/from non-VA provider)

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## Processes – COMCARE

(p. 8)

- Receive claim from EMS and input into COMCARE software
- Patient data validation
- Electronic/paper claim generated; VA requires paper
- Mail to insurer/patient
  - Beneficiary travel (to VA FBO)
  - Mill bill (to Chief Business Office)

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## Processes – VA

*(p. 9)*

### Beneficiary travel

- Manual process
- Purchase order created
- Invoice submitted
- Two staff certify
- Payment processed from Treasury in Texas
- COMCARE staff reconcile to system
- New: feedback on transports in 1 business day

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## Processes – VA

*(p. 10)*

### Mill bill

- Forms scanned electronically
- Complications arise from hospital stays
- Approved, payment made
- Not approved, denial communication issues arise

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## **Reconciliation**

*(p. 13)*

- Data compilation
- Site visit
- Preliminary process improvements identified
- Clear discrepancies identified and resolved
- Ongoing discussion regarding claim review

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## **Reconciliation - cont.**

*(p. 15)*

- Payments processed
- Findings with recommendations identified
- Data review completed by County
- Begin wrap-up

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## Finding #1 - Reconciliation Results

(p. 16)

Year Service Provided	Total EMS Claims Billed to VA by COMCARE	Total Claims Submitted to VA	# of Claims Outstanding After Reconciliation	Unresolved as of 3/22/2018	% of # of Claims Classified as Unresolved	% of Dollars Classified as Unresolved
2014	529*	\$343,783	96	\$65,646	18.1%	19.1%
2015	1,225	\$859,588	172	\$132,096	14.0%	15.4%
2016	1,324	\$1,024,037	367	\$307,830	27.7%	30.1%
2017	1,104**	\$839,538	345	\$295,782	31.3%	35.2%
<b>Totals</b>	<b>4,182</b>	<b>\$3,066,946</b>	<b>980</b>	<b>\$801,354</b>	<b>23.4%</b>	<b>26.1%</b>

\*Reflects July 1, 2014 to December 31, 2014

\*\*Reflects January 1, 2017 to September 30, 2017

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## Finding #1 - Reconciliation Results

(p. 16)

<u>VA</u>			<u>COMCARE</u>		
Year	Avg. # of Days from Claim to Payment	Greatest Time Span	Year	Avg. # of Days from Date of Service to Billing	Greatest Time Span
2014*	675	1,206	2014*	123	1,139
2015	409	1,019	2015	126	936
2016	156	678	2016	94	623
2017**	157	288	2017**	55	213

\*Reflects July 1, 2014 to December 31, 2014

\*\*Reflects January 1, 2017 to September 30, 2017

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## **Finding #2 – Quality Assurance**

*(p. 18)*

- Sedgwick County and VA each have limited controls to prevent errors
- Both entities would benefit from increased Quality Assurance
- VA
  - Software
  - Claim verification
- Sedgwick County
  - Staffing
  - Patient data verification

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## **Finding #3 – Communication**

*(p. 20)*

- Historical communication issues
- Monthly reports to be exchanged
- Quarterly meetings between COMCARE / VA staff
- Communication has broadened and improved since reconciliation began

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## **Finding #4 – VA Claim Process**

*(p. 21)*

- Processes have changed over the years
- Changes have created confusion for County staff
- Ongoing monthly / quarterly communications should help

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## **Finding #5 – Software Issues**

*(p. 22)*

- Both entities face claim software issues
- VA lacks central beneficiary travel software tool
- COMCARE's system has limitations
- Staff training regarding procedures could limit opportunity for error in lieu of software fixes

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## **Finding #6 – County's Tracking Process** *(p. 23)*

- Staffing changes resulted in inconsistency
- Lack of written procedure
- Process would benefit from external review/audit

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## **Finding # 7 – Staffing and Process Improvement Resources** *(p. 24)*

- Lack of resources/depth for both sides
- VA
  - Beneficiary travel historically handled by one staff
  - OIG completes yearly audit
- COMCARE
  - Staffed at less than industry standard
  - Originally in-sourced to save money; additional staff would reduce savings
  - Outsourcing to be considered

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## **Recommendations – County Management** *(p. 25)*

- Need quarterly feedback on status
- Evaluate need for staff or outsourcing
- Consider audits
- Use internal financial auditors for reviews

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## **Recommendations – COMCARE** *(p. 25)*

- Address duplicate claims
- Establish documentation for processes and procedures, then enforce
- Use ERP for reports
- Continue fostering communications with VA

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## **Recommendations – EMS**

*(p. 25)*

- Work with COMCARE to establish combined process flowchart

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## **Recommendations – Finance**

*(p. 26)*

- Monitor and advocate
- External audit reviews

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## Recommendations – VA

(p. 26)

- Ensure ongoing communication with all providers, including Sedgwick County
- Ensure anticipated process improvements occur or consider adding resources
- Data access improvements
- Written processes and procedures for providers
- Standardized denial language

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## Questions



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