Patient Access Skills Program: Implementing And Sustaining A Competency Assessment Based Career Ladder
Presenters

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Associate Director of Patient Access Services

The University of Texas MD Anderson Cancer Center
Houston, Texas
The University of Texas MD Anderson Cancer Center

We specialize in Cancer Diagnosis and Treatment. We are ranked as one of the top two hospitals in cancer care every year since U.S. News & World Report began its annual “America’s Best Hospitals” survey in 1990. Our Physicians are employees.

645 inpatient beds  
>18,000 total employees  
>34,720 new patients a year  
>2.8 million eligibility and authorizations a year
Patient Access Services

Hybrid Decentralized/Centralized Approach

- Decentralized –
  Each outpatient clinic is staffed with patient access personnel who report to the Clinic Director

- Centralized –
  The Patient Access Administration Department is responsible for:
  - Establishing and maintaining institutional polices
  - Training all new staff and existing staff
  - Working in collaboration with IT on system maintenance
  - Conducting clinic audits
  - Maintaining front end scrubber rules and working challenges
  - Assisting with float pool requests
  - Skills Assessment Program
Key Functions

Staff attend a 4 week new hire training class that includes a mid-term and final exam.
Position Descriptions

• Patient Access Supervisor – each clinic has a RN supervisor responsible for attending weekly Supervisor meetings

• Patient Access Coordinator – a RN that uses clinical skills in obtaining authorizations for outpatient services, admissions and research trials.

• Patient Access Specialist – a non clinic position that carries out the daily functions of patient access
Challenges

• Ensuring decentralized work is carried out in accordance with policy

• Ensuring staff are embracing change and adopting new processes

Lack of performance evaluation standards

• Lack of a career ladder for Patient Access Specialist Coordinator career path often lead to a Supervisor role, but no track for Specialist

• Lack of certification pay for Patient Access Specialist Supervisors and Coordinators received certification pay through the central nursing office skills in obtaining authorizations for outpatient services, admissions and research trials.
Committee Responsibilities

• A committee was formed in October 2007 to identify, discuss and develop a proposed professional development model (PDM) for patient access specialist (PAS).

• The model was intended to design strategies to:
  • utilize a consistent method for staff development
  • utilize a consistent performance management process
  • develop a total rewards program designed to recognize and incentivize outstanding performance & accomplishments
  • retain staff and decrease interdepartmental turnover

• Committee comprised of Patient Access Supervisors, Patient Access Coordinators, Patient Access Administration, Facilitator from VP of Clinical Operations Office, Clinical Director Advisor, Human Resource (HR) staff from Compensation & Organizational Development
Development of Model

• **Review of Existing Models**
  Patricia Benner’s professional development model—Novice to Expert was being utilized by our nursing staff

• **Review of the Market Place**
  Collected position descriptions from other hospitals both locally and nationally as well as reviewed competency tools used by others

• **Review of Current Tools**
  Numerous centers had developed their own checklist tools in absence of an institutional competency assessment checklist

• **Literature Review**
  ‘Staff Competency in Patient Access’ by Michael Friedberg
  Customer service manual ‘Hardwiring for Service Excellence’
Competency Outline Development

I. **New Patient Access:**
   - Intake Policy
   - Involved Providers
   - Name Search
   - Referral Pathways - Codes, Flags, Indicators
   - Alias and Confidentiality Policy
   - Medical Acceptance Criteria
   - Medical/Cancer Terminology
   - Performance Status
   - Scheduling

II. **Registration:**
   - Registration Pathways
   - MSPQ
   - Consents
   - Scanning System
   - Advance Directives
   - Registration Policy & Template
   - Medical Identity Theft Policy
   - HIPAA Handouts
   - Financial Disclosure Form
   - Insurance Coverage Summary

III. **Revenue Integrity:**
   - Managed Care Terminology
   - Benefit Verification - Maximums/Deductibles/
     Coinsurance/Co-pays/Pre-existing
   - Insurance Authorization
   - Diagnostic Testing/Surgeries
   - Admission Precerts/Referrals
   - Advance Beneficiary Notices
   - Hospital to Hospital Transfers
   - Insurance Code Selection & Loading
   - MSPQ & Coordination of Benefits
   - Financial Clearance for Insured Patients
   - Denials

IV. **Financial Counseling:**
   - Cost Estimates
   - Payment plan policy
   - Discount policy
   - Cobra
   - Financial Assistance
   - Administrative Override/Account Review
   - Billing & Collection Agency Placement
Competency Outline

- Circulated Content Outline to all Staff
- Circulated Content Outline to all Clinic Directors
- HR Organizational Development held a focus group meeting with 12 Patent Access Specialists
Modifications Required

• Changed Position Description
  Key functions were reviewed as well as updating the certification requirements to include CHAA and CHAM as preferred certifications

• Changed Performance Evaluations
  Changed to match new key functions of the position descriptions

• Training Manual
  Aligned our New Hire Training with the new Competency Outline, which included developing an online training manual that would be used for new hire training as well as an ongoing reference tool for existing staff.
Levels

We developed Four Levels in our skills model. Each level required a timeline and minimum requirements.

• **Novice** – New employees are required to complete this phase and attend the patient access training class within the first six months of employment. Employees must advance to the next level to remain in the title.

• **Enrichment** – Employees build on learned skills. Advancement to the next level is required and is accomplished by completing the enrichment competency checklist within 12 months in the job title.

• **Independent** – Employees retest their competency skills and meet outlined goals. Employees may remain in the independent phase without advancing to advanced phase.

• **Advanced** – To move to the advanced level, employees must achieve all required elements outlined in the model and pass all four skills competency modules. In addition, employees must hold the title Certified Healthcare Access Associate (CHAA) or Manager (CHAM). This level is optional.
## Patient Access Skills Model Program

<table>
<thead>
<tr>
<th>Category</th>
<th>Novice Phase</th>
<th>Enrichment Phase</th>
<th>Independent Phase</th>
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<tbody>
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<td>Initial 6 months in position (Advancement Required)</td>
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<td>New Patient Access</td>
<td>Complete Initial Training and Novice Checklist</td>
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<td>Complete Skill Assessment Exam passing <strong>Three</strong> out of Four Modules (Required every 2 years)</td>
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</tr>
<tr>
<td><strong>Behaviors</strong></td>
<td>Institutional Customer Service Training Module 1 &amp; Customer Service Portion of Checklist</td>
<td>Institutional Customer Service Training Module 1 and 2 &amp; Customer Service Portion of Checklist</td>
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<td>N/A</td>
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### Checklists

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<th>Registration</th>
<th>Performs all duties of new patient registration consistently and accurately</th>
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<tr>
<td></td>
<td>1. Utilizes correct registration pathways</td>
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<td>2. Collects appropriate monies during registration</td>
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<td>3. Copies insurance cards</td>
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<td>4. Completes Consents accurately and consistently</td>
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<td></td>
<td>5. Validates parking appropriately</td>
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<td></td>
<td>6. Completes MSPQs on Traditional Medicare new patients</td>
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<td></td>
<td>7. Completes Insurance Coverage Summary</td>
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<td></td>
<td>8. Provides Privacy Brochure consistently</td>
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<td></td>
<td>9. Checks patient identification and provides Medical Identity Theft Brochure consistently</td>
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Customer Service

- Every level of the skills program contains customer service modules
- Each new hire training class includes a customer service module including role playing and videos
- MD Anderson has purchased a series related to customer service training that all staff must complete emphasizing our core values
- Additionally each staff member must take a classroom or online customer service class each year
Performance Evaluation - Behaviors & Core Values

Performance evaluations align to the key functions and behaviors

- **Key functions** include: New Patient Referral, Registration, Revenue Integrity and Financial Counseling

- **Behaviors** include our core values of caring, integrity and discovery
  - staff must have an Average rating of ‘3’ score or above (on a 5 point scale)
  - to achieve the Advanced level, staff must have a score of ‘4’ or above on EACH of the 6 elements
Performance Evaluation - Goals & Committee /Projects

• **Goals/Development**
  Each supervisor is required to place two goals on an employee’s evaluation, one must be job specific. To move to Advanced level, the employee must achieve all goals.

• **Mentoring**
  Staff begin in a Preceptee role, advance to a Mentee role then act as a Preceptor when they reach the Independence phase. In the Advanced level, the employee becomes a Mentor to other new hires.

• **PI/Committees**
  Staff participate in PI projects and committees at the Independence phase & take a lead role in the Advanced level.
Certification

MD Anderson values national patient access certification

• Exam fees are paid for the employee to sit for an initial certification. A retake is also paid for if needed. After one failed retake, the employee must pay for their own certification

• To reach the Advanced level, an employee must achieve and maintain their CHAA or CHAM status

• Renewal of CHAA and CHAM status are paid for by MD Anderson

• Currently working with NAHAM to obtain Magnet recognition for CHAM
Skills Exam

• HR Organizational Development conducted a focus group to determine the percentage of time staff spent on each function of the content outline. This data was used to determine how many questions should be written on each topic.

• A group of Supervisors, Coordinators and members of the Patient Access Administration office developed test questions based on written policies and usage of the computer system.

• The exam is a multiple choice online test that is administered during two months of each year – September and March. It is broken into four modules. Each module has 30 questions and each question has four choices (A, B, C or D). Three hours are allotted to complete the exam.
# Program Overview

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**Fast Track Option:** For employees who left the Patient Access title and are returning to the title, they may choose to accelerate the Novice Phase in 3 months and the Enrichment Phase in 6 months. Once they achieve a Pass rating on their probationary period, they can participate in the skill assessment exam and be eligible to apply for the Independent phase.
Implementation

• Presented the program to the Clinic Directors for approval

• Presented the program to our Vice President seeking funding for certifications and skills pay, as well as hire one additional Education Coordinator

• Develop program overview handout for staff including FAQs and distributed it to all staff via email

• Conducted two open forum meetings for staff to come and ask questions

• Provided educational refresher courses
Skills Program Maintenance

• Each June all employees must resubmit an application for Independence or Advanced level

• Employees achieving Independence will receive a lump sum payout on July 16th of each year

• Employees achieving Advanced status are not eligible for the lump sum payout, but can begin their per pay check skills pay the month following achievement

• Employees that fail to maintain their level of Advanced will continue to receive pay until the following renewal period
Application

Patient Access Skills Achievement Verification Form

Complete the form and attach copies of the following documents: skills assessment certificate, MDACC transcript, CHAA/CHAM certification (if applying for Advanced phase) and latest performance evaluation.

Submit to the Director of Patient Access Services. For Independent Phase, the deadline for receipt is June 1. For Advanced Phase, skills pay will be effective on the 16th of the month following the form receipt.

Name: ____________________________________________________ Title: ______________________________
Department: ________________________________ Supervisor Name: __________________________________
Application for: ___Independent Phase _____ Advanced Phase

Skills Assessment Exam

# of modules successfully passed
Requirement: Independent – 3; Advanced – 4

Customer Service (CS):
MDACC Module 1
MDACC Module 2
Name of Additional CS class

Performance Evaluation – Behavior/Core Values Section
Independent—Enter average combined section rating
Advanced—Enter the lowest rating in the section

Development/Goals – (Advanced only)
Achieved/Mitigated all goals as outlined in last performance evaluation – Enter Evaluation Date

Mentoring / PI Project/ Committee
For Independent:
*Enter the word ‘Preceptor’ & name of preceptee OR
*Enter the Committee Name OR Enter the PI Project Name

For Advanced:
*Enter the word ‘Mentor’ & name of the Mentee OR
*Enter the Committee Name and describe your role on that committee OR
*Enter the PI Project Name and describe your role on that project

Certification – (Advanced only)
CHAA or CHAM

I attest and declare by my signature below that I have a have met the requirements for participation in the skills pay program. I understand that I may be audited and required to produce evidence that verifies that I have met the requirements.

________________________________________________________
Applicant Signature

___________________
Date

National Association of Healthcare Access Management

NAHAM
## Exam Results

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<th></th>
<th>Sept 2010</th>
<th>Sept 2012</th>
<th>March 2013</th>
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<tbody>
<tr>
<td>Total</td>
<td>210</td>
<td>123</td>
<td>75</td>
</tr>
<tr>
<td>Pass 4 of 4</td>
<td>49%</td>
<td>58%</td>
<td>61%</td>
</tr>
<tr>
<td>Pass 3 of 4</td>
<td>27%</td>
<td>24%</td>
<td>23%</td>
</tr>
<tr>
<td>Failed</td>
<td>24%</td>
<td>18%</td>
<td>16%</td>
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57% of those that failed the initial exam had low performance evaluation scores: compared to only 15% of those that passed.

Each staff member may retake the exam two additional times and then they are released from their position if they are unsuccessful. To date, we have not had to release anyone.

Several staff members have failed to meet the ongoing qualifications for Advanced and have moved back to Independent level.
<table>
<thead>
<tr>
<th></th>
<th>FY12 Q1</th>
<th>FY12 Q2</th>
<th>FY12 Q3</th>
<th>FY12 Q4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pass</td>
<td>75%</td>
<td>65%</td>
<td>64%</td>
<td>67%</td>
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Over 180 employees have achieved CHAA or CHAM status since the beginning of the program.
Skills Test Maintenance

• Continuing education classes are held several times a month as well as individual assistance as needed

• An Education Calendar and training material are posted on the Patient access intranet site

• Test questions are reviewed prior to each exam administration to ensure questions are still in line with current policies

• Testing schedule is coordinated 60 days in advance of test dates

• Offer test electronically, by paper and orally
Lessons Learned

• This process took two years to implement, ensure that you set a realistic timeline.

• Have the training manual and educator resources available to support the employee’s educational needs.

• Celebrate when staff move to the Advanced level as well as when they achieve CHAA/CHAM certification – we recognize staff in our quarterly newsletter
Questions?