

## Spotlight on...Benedict Center

For the past two years, in an attempt to help Wisconsin STAR-QI providers diversify their revenue base, the STAR-QI program has offered Third Party Revenue as a Focus Area for providers to participate in. This year, the STAR-QI program has six providers focusing on increasing Third Party Revenue. The providers have found that the NIATx model, which provides structure and data to guide their process improvement, combined with the support of the STAR-QI program, and resources available through NIATx, have been a successful combination to assist Wisconsin agencies with the complex task of transitioning from block grant funding to third party reimbursement.

One of the agencies who have realized success in improving third party reimbursement is the Benedict Center. The Benedict Center is a non-profit agency serving women with the criminal justice system in Milwaukee addressing treatment for past trauma, stress and anger management, substance abuse, healthy lifestyles and employment. Jeanne Geraci is the Executive Sponsor and Janet Miller is the Change Team Leader for the STAR-QI Program.

With the support of the monthly STAR-QI Third Party Revenue Focus Area calls, the Benedict team began the project by deciding to increase Title 19 insurance by 5%. Following are the subsequent rapid cycle steps that the change team implemented using the NIATx model as their guide:

1. In their first rapid cycle, the Benedict Center identified clients with Title 19 insurance.
2. In their second rapid cycle, the Program Assistant learned how to utilize the Forward Health Portal to identify insurance for all incoming participants.
3. In the third change cycle, the Program Assistant tracked the attendance on Title 19 AODA clients to understand billing capacity.
4. In the fourth rapid cycle, the Benedict Center began the process of getting counselors approved for billing to increase the number of billable treatment hours in the program.
5. In the fifth rapid cycle, the Program Assistant learned the online billing system for Title 19 and reviewed the NIATx prepared Third Party Billing Guide for applicable suggestions from other NIATx providers.
6. In the final rapid cycle of the reporting period, the Benedict Center submitted bills for the last quarter of 2012.

When the Benedict Center began this project, they had not ever collected any revenue through Third Party Billing. Because they had identified what percentage of clients were insured through Forward Health and which HMOs were common among the participants, they knew which HMOs to approach first. Tracking attendance also allowed the Benedict center to identify which group times were the most heavily attended and allowed them to evaluate if two groups should be held at the same time, and when individuals are most likely to attend one-on-one sessions. Within two months, the counselor was approved for billing and a policy and procedure was developed for new counselors to become approved providers as soon as they started with the Benedict Center. Over \$800 in revenue was obtained for the last quarter of 2012.

The transition that the Benedict Center has begun from block grant funding to third party reimbursement is to be congratulated. The team has experienced numerous barriers which they continue to handle with a balance of patience and persistence. The structure of the NIATx model, the support provided through the STAR-QI monthly teleconference calls, and helpful resources such as the NIATx Third Party Billing Guide, have been instrumental in the Benedict Center beginning this process and experiencing success.