Administrative Simplification and the Mass Collaborative

Massachusetts Association of Patient Account Management
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mass collaborative
Simplifying Healthcare Administration

Discussion Points

- **Mass Collaborative**
  - History / Mission
  - Successes and challenges
- **Successes and Challenges**
- **Next Steps**

Mass Collaborative Mission

Collaborate with Massachusetts healthcare payers and providers to simplify and improve healthcare administration by increasing transactional efficiency, eliminating waste and promoting standardization.

Mass Collaborative

- **Organized in 2010 and led by various stakeholders**
- **Large participation by most key stakeholders including:**
  - All local health plans
  - Numerous provider groups
  - State medical and hospital associations
  - MassHealth
- **Keys to success include:**
  - Having senior executives lead the agenda ensuring buy-in across stakeholders
  - Collaborative development of a shared vision/mission

Collaborative Successes

- **Identification of major 'pain points' aligned with the provider revenue cycle**
  - Front-end: contracting, eligibility and benefits verification, authorizations/referrals, case management, and coding
  - Back-end: claims/claims status, remittances, denials, over/under payments, appeals
- **Improving provider credentialing:**
  - Goal: End-to-end cycle time improvement
  - Process: Engagement with all stakeholders
  - Progress: Strategic evaluation completed in November

Collaborative Challenges

- Small / ancillary provider engagement
- Working through conventional doubts and perceptions
- ‘Gray’ issues that blur operational and policy lines
- Measures of success
- Navigating the path to digital transactions/workflows

Next Steps

- **Develop and share authorization forms with Division of Insurance**
- **Continue implementation of streamlined medical credentialing**