

DEVELOPMENTAL DISABILITIES ADMIN Interagency Transfer



2016 SUPPLEMENTAL BUDGET

| Request | FY16 | FY17 | 15-17 |
|--------------|----------|-------------------|-------------------|
| FTE | 0.0 | 0.0 | 0.0 |
| GF-State | 0 | (\$23,000) | (\$23,000) |
| Total | 0 | (\$46,000) | (\$46,000) |

DECISION PACKAGE SUMMARY

The Developmental Disabilities Administration (DDA) requests a transfer of (\$46,000) Total Funds in the 2016 Supplemental Budget to the Health Care Authority (HCA) for costs associated with client physician visit services for DDA clients, including those services received in Federally Qualified Health Centers (FQHC).

PROBLEM STATEMENT

DDA clients receive a variety of physician services, including services received at an FQHC. These are the only medical services paid by DDA for these clients; all other medical services paid under Medicaid are paid by HCA. ProviderOne is the payment system for these services. In some cases the payer is DDA, while in others the payer is HCA. This creates errors in payments processed by ProviderOne because the system is not able to pay for services that are provided by different agencies. In cases where the client went to an FQHC, for example, the client may get a physician's visit, a flu shot, and immunizations. Because the provider is a participating FQHC, DDA pays one amount (an encounter rate) for everything provided at that visit, regardless of the cost of the individual services. However, the system cannot pay both HCA and DDA services on the same claim. If the claim is split and providers have to bill on two claims, ProviderOne will pay the provider for two encounters resulting in an automatic overpayment. These overpayments cost excessive agency staff time, create interagency transfers, and result in inefficiencies that can be avoided.

PROPOSED SOLUTION

The only solution currently available in this case is to transfer funding and the responsibility to pay the medical service claims to HCA who would pay FQHC claims for DDA clients, eliminating the overpayments.

EXPECTED RESULTS

Transferring this funding will eliminate overpayments to FQHCs and other medical providers, freeing up staff to perform their primary roles and lessening the impact of overpayments on providers.

STAKEHOLDER IMPACT

This transfer request is supported by HCA to increase program efficiencies and lessen the impact of overpayments on providers.



DSHS VISION

People are healthy • People are safe • People are supported • Taxpayer resources are guarded

DSHS MISSION

To transform lives

DSHS VALUES

Honesty and Integrity • Pursuit of Excellence • Open Communication • Diversity and Inclusion • Commitment to Service