Goal: Getting Payments Right

Program or Activity Community Care Reporting Period Q4 2019

Change from Previous FY (\$M)

\$705M





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Community Care

Brief Program Description:

The VA Community Care program provides timely and specialized care to eligible Veterans. The program allows VA to authorize Veteran care at a non-VA health care facility when the needed services are not available through the VA, or when the Veteran i

Key I	Milestones	Status	ECD
1	Finalize estimated cash loss estimation methodology	Completed	Nov-18
2	Identify estimated cash loss amount for FY 2018	Completed	Nov-18
3	Identify true root causes of cash loss	Completed	Nov-18
4	Develop mitigation strategies to get the payment right the first time	Completed	Dec-18
5	Evaluate the ROI of the mitigation strategy	On-Track	Apr-21
6	Determine which strategies have the best ROI to prevent cash loss	On-Track	Jul-21



Quarterly Progress Goals			Status	Notes	ECD
1	Q4 2019	Implemented remaining sites into the eCAMS system. This system allows authorized claims that meet necessary criteria to be paid without human intervention.	On-Track	eCAMS was implemented with Initial Operating Capability (IOC) in the first VISN in March 2019 and expected to deploy nationally by the end of the calendar year.	Dec-19
2	Q4 2019	Utilize our current quality review audit process to identify incorrect adjudication trends and apply training/guidance based on findings.	On-Track	OCC is in the process of analyzing and identifying trends from our internal Quality Review Audits. OCC will categorize areas of improvement from audit results and plans to conduct regional training.	Jan-20
Recent Accomplishments					
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Rec	Recent Accomplishments			
1	OCC has implemented the VA MISSION Act which provides VA the ability to account for the unique nature of health care in rural areas. To attract providers into the community care network, VA can pay higher payment rates to highly rural areas.	Jun-19		
2	Development of Appeal HUBs has assisted in consolidating and standardizing processes as well as help to improve production and accuracy of appeals processing. This has resulted in reduction in legacy appeals inventory by 60% since August 2018.			
3	Hired Service Manager and customer support to conduct provider outreach via education, webinars, etc. and address Provider inquiries via Provider Services functions and recurring monthly webinars where program updates and improvements are briefed.	Sep-19		

FY18 Amt(\$)	Root Cause	Root Cause Description	Mitigation Strategy	Anticipated Impact of Mitigation	
\$1,021M	Administrative or process errors made by: federal agency	Centers for Medicare and Medicaid Services (CMS) rates were not fully implemented and deployed to the claims processing system as required by 38 CFR § 17.56 and 17.1005 in accordance with VA Community Care policy.	Implement the one remaining of seven Medicare Fee Schedules into	Ensure CMS rates are available to calculate reimbursement rates. Implementing the remaining Medicare Fee Schedules will have an immediate impact on the reduction of improper payments associated with erroneous or missing CMS schedules.	
		Various claims processing errors can occur due to manual processing or human intervention and therefore introduces risk. Categories include: application of scrubber edits, eligibility determinations, and keying errors.	reporting process for supervisors to submit the results of quality	OCC will be able to detect error trends at both the local and national level. If error trends are detected, internal controls will be implemented to prevent future errors.	
		Complex pricing rules and methodologies coupled with the use of a manual pricing process results in risk and errors related to payment amounts as well as other pricing and payment methodology errors.	Implement business rules into the Program Integrity Tool (PIT) and FBCS to proactively identify improper payments in a pre-payment state.	Implementing business rules into the PIT and FBCS to proactively identify improper payments in a pre-payment state will allow OCC to stop improper payments before they happen.	