## **Utilize Diverse Payment Options to Reduce Cost** as a Barrier for the Facility and the Patient



| How to Use<br>This Guide  | This guide is designed to support facilitation of an interactive learning session on how to Utilize Diverse Payment Options to Reduce Cost as a Barrier for the Facility and the Patient: Best Practice 4 from the Contraceptive Access Change Package, whose purpose is to drive improvement on the contraceptive care performance measures.  Facilitators should feel free to adapt and revise this guide. Facilitators may choose to:  Onvene staff from one or more clinics for a standing meeting (e.g., monthly) to discuss each Best Practice (in order or as needed) from the Contraceptive Access Change Package. (See other Best Practice discussion guides.)  Convene a one-time meeting with clinic staff about this topic. |  |
|---------------------------|---|--|
| Learning<br>Objectives    | <ul> <li>By the end of the discussion, participants should be able to:         <ul> <li>Describe the rationale for reducing cost as a barrier to contraceptive services</li> <li>Identify at least one strategy to reduce cost as a barrier for access to contraception</li> <li>Identify at least one resource to support you in utilizing diverse payment options for contraceptive services</li> </ul> </li> </ul>   |  |
| Length                    | At least <b>60 minutes</b> , with more time for discussion as schedules allow. Example discussion questions are provided; facilitators can use them based on participant interest.  |  |
| Materials                 | <ul> <li>Contraceptive Access Assessment: Site-level assessment to identify strengths and areas of opportunity to increase access to contraceptive methods</li> <li>Contraceptive Access Change Package: Summary of evidence-based recommendations for increasing access to contraceptive methods, strategies, case studies, tools, and resources</li> <li>PowerPoint Slides with Notes: Slides with speaker notes and discussion questions</li> </ul>  |  |
| Format                    | Discussions can be facilitated <b>virtually or in person.</b>   |  |
| Suggested<br>Participants | <b>Staff from one or more family planning clinics.</b> Involving multiple sites can facilitate peer-to-peer sharing. Having representation from clinical, administrative, and financial staff can help address system issues.   |  |
| Before you<br>start       | Participants should <b>complete the Contraceptive Access Assessment</b> and bring their completed assessments to the meeting. If this is not possible, the facilitator should provide printed assessments and an additional 10-15 minutes for participants to complete them during the meeting.   |  |

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|        | Orientation to Utilizing Diverse Payment Options: Topic and Objectives  5 minutes  7 Slides 1-5   |  |  |  |  |
|--------|---|--|--|--|--|
| $\Box$ | Present Slide   | Facilitate   |  |  |  |
| 1      | Utilize Diverse Payment Options to Reduce<br>Cost as a Barrier for the Facility and the<br>Patient: Contraceptive Access Change<br>Package: Best Practice 4 | Activity:  » Conduct participant and facilitator introductions.  |  |  |  |
| 2      | Introduction to the Contraceptive Access<br>Change Package  |  |  |  |  |
| 3      | Contraceptive Access Change Package:<br>Best Practice 4   |  |  |  |  |
| 4      | Meeting objectives  |  |  |  |  |
| 5      | Rationale for utilizing diverse payment options   |  |  |  |  |
|        | Cost-Related Challenges and Overview of Payment Strategies 10 minutes Slides 6-10   |  |  |  |  |
| $\Box$ | Present Slide   | Facilitate   |  |  |  |
| 6      | Contraceptive Access Assessment   | Activity:  » Participants will fill out or refer to the Contraceptive Access Assessment tool. Ask participants to fill out ahead of time, or provide 10-15 additional minutes to fill it out during the session.   |  |  |  |
| 7      | Discussion of challenges  | Discussion:  » Reflecting on the results of the Contraceptive Access Assessment, to what extent is cost a barrier for your patients? For your facility?  » What is challenging about ensuring that your patients have access to services, regardless of ability to pay? What method-specific challenges do you face? |  |  |  |
| 8      | Overview of strategies  |  |  |  |  |
| 9      | Title X program requirements  |  |  |  |  |
| 10     | Obtain third-party reimbursement  |  |  |  |  |

#### **DISCUSSION GUIDE**

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| Billing and Reimbursement from<br>Third-Party Payers |  | 25 minutes Slides 11-21  |
|--|--|--|
| $\Box$   | Present Slide  | Facilitate   |
| 11   | Case scenario: patient (Amy) wants a hormonal IUD. First, Amy opts to use her parents' insurance |  |
| 12   | Billing and reimbursement: challenges  | <ul> <li>Discussion:         <ul> <li>What challenges do you have with billing third-party payers for LARC?</li> <li>Are you getting reimbursed for all methods (including LARC) for all insured patients successfully? For what methods are you having issues, and in what patient situations?</li> </ul> </li> </ul> |
| 13   | Billing and reimbursement: strategies for quality assurance                                      |  |
| 14   | Billing and reimbursement for same-<br>visit LARC  | Discussion:  » Are you successfully obtaining reimbursement for LARC insertions provided same-visit? If yes, how are you doing it? If no, why not?   |
| 15   | Sample device tracking   |  |
| 16   | Common modifiers for LARC  |  |
| 17   | Same-visit modifiers   |  |
| 18   | Coding eLearning course (FPNTC)  |  |
| 19   | Coding podcast series (CTCFP)  |  |
| 20   | Coding palm card job aid (CTCFP)   |  |
| 21   | Billing and coding toolkits  |  |

#### DISCUSSION GUIDE

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| Reducing Cost as a Barrier for Self-Pay Patients   |  | 10 minutes Slides 22-26  |
|--|--|--|
| $\Box$   | Present Slide  | Facilitate   |
| 22   | Case scenario: patient (Amy) now says she is not sure about using her parents' insurance           | Discussion:  » What challenges do you have related to confidential billing?  » How do you ensure confidentiality for patients who require it?  » What strategies have you used to ensure no EOB is sent? |
| 23   | Confidential Billing Staff Workflow (NFPRHA)   |  |
| 24   | Strategies for obtaining low-cost supplies   |  |
| 25   | 340B resources   |  |
| 26   | Use all available revenue sources  |  |
| Success Stories: Lessons Learned<br>From the Field |  | 5 minutes Slides 27-28   |
| $\Box$   | Present Slide  | Facilitate   |
| 27   | Success story: engaging all staff in finance issues (Family Health Council of Central PA)          | Discussion:  » What opportunities exist for you to increase staff engagement and reduce cost as a barrier?   |
| 28   | Success story: comprehensive approach to reduce cost as a barrier (Montana Dept. of Public Health) | Discussion:  » What is one strategy that we've talked about today that you may want to adapt or implement to reduce cost as a barrier?   |

### DISCUSSION GUIDE

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Contraceptive Access Change Package: Best Practice 4

| Conclusion                | 5 minutes Slides 29-30   |
|---------------------------|--|
| Present Slide             | Facilitate   |
| 28 Closing and reflection | Discussion:  » What other questions do you have for each other before we end? Are there other issues or challenges that we haven't discussed yet?  » What is one thing you will take away from today's discussion? |

29 Thank you