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Prudential Productivity Awards Recognize Five Teams from AHCA

TALLAHASSEE, Fla. – Today, the Agency for Health Care Administration (Agency) announced that five teams of Agency staff members have been selected as winners in the annual Prudential Productivity Awards.

Agency Secretary Justin M. Senior, “I am honored to congratulate this year’s Prudential Productivity Award winners on their contributions to the Agency and the state. These employees found innovative solutions to complex issues in an effort to help Florida government operate more efficiently and reduce costs to taxpayers. Thank you for all that you continue to do for our state.”

Since the program’s inception in 1989, the Prudential Productivity Awards committee has received more than 16,000 nominations. The committee has given awards to state employees who have cumulatively saved or maximized more than \$9.2 billion in taxpayer dollars.

The following Agency employees were selected as winners:

Business Analytics Team

Winners: *Kimberly Noble, Emily Kinman, Bryan Cook, Barbara Fincher*

The Agency saved thousands of dollars by organizing an Agency and Inter-Agency Tableau User Group. These groups train users on the fundamentals of Tableau, Tableau best practices, and serve as ongoing resources for help and trouble-shooting.

The Tableau User Groups fill the need of training new and experienced Tableau users. Training by Tableau is approximately \$700/day per participant if the trainee travels to the training site (not including travel costs). Bringing a certified trainer to Tallahassee costs \$1000/day per participant with a 12-15/person minimum.

Multiple agencies participate in the Tableau User Group and benefit from the cost savings. The Inter-agency group averages 25 attendees monthly (1.5 hours) from at least 10 different State agencies. The Agency group averages 15 attendees twice a month.

Estimated Yearly Savings: \$101,250.00

Medicaid Provider Enrollment Streamlined Credentialing Team

Winners: *Shawn McCauley, David Powers, Tamara Strayer, Nicholas Constantino, Ross Hart, Terry Schmidt, Pamela Hull*

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The team designed, developed, and implemented a streamlined Medicaid provider enrollment application, called Limited Enrollment, for providers seeking to participate in Medicaid health plan networks that eliminated an administrative burden on the plans, as well as providers who participate in multiple health plan networks.

The implementation of Statewide Medicaid Managed Care (SMMC) presented the Agency with two concerns raised by the health plans that this project addressed. Providers who did not want to fully enroll in Medicaid and were contracted with more than one health plan had to be fully credentialed individually by each health plan, providing the same documentation or variations for each. For providers who wished to fully enroll with the Medicaid program, the health plans had to wait until the enrollment process was completed before a Medicaid provider ID could be assigned.

The new process provides relief to the Medicaid health plans and providers from the administrative burden through a simplified process. The Limited Enrollment application serves as a single point of submission for provider data and eliminates duplicative submissions of data by providers to multiple sources.

Estimated Yearly Savings: \$300,000.00

FLAIR Automation Team

Winners: *Katrina Derico Harris, Sharon Dixon, Patricia Williams, Verionica Bishop, Cassandra Gainer*

The automation of the Medicaid Accounts Receivables (MAR) to FLAIR upload has been implemented to eliminate the MAR revenue holding account and reduce the length of time to update the MAR and FLAIR accounts, to make recouped funds available sooner.

The automation eliminated the MAR holding account and reduced the time it takes to update the MAR revenue accounts in FLAIR. In the past, the money was deposited into the MAR holding account until it was determined where to allocate the funds.

The implementation of the automated process reduced the upload period from one week to a day, eliminated the manual process of preparing the spreadsheet, reduced the chance for manual entry errors, and made the fiscal year-end accounting process more efficient and accurate.

The implementation of the MAR FLAIR upload automation eliminated steps in the original process by eliminating the need for a revenue holding account. It also significantly improved year-end performance by allowing staff to work on other critical efforts related to closing out the Agency financials before June 30, 2017. This improvement has reduced processing time by 80% for all related transactions and reduce the amount of manual keystroke errors.

Estimated Yearly Savings: \$7,341.55

Medicaid Exceptional Claims Processing Re-Design and Consolidation Team

Winners: *Deborah Warfel, David Powers, Gayle Ninis, Catherine Eichenlaub, Catherine Nowotny, Don Fuller, Aaron Lounsberry, Sheila Gonzalez, Ondria Bacon, Teresita Fitzgerald*

The Medicaid Exception Claims Processing Re-Design Team developed and implemented a process that allows Medicaid providers to submit exceptional Medicaid claims directly to the Medicaid Fiscal Agent, bypassing the manual screening and tracking process previously performed by the Medicaid Field Offices, and allowing the Field Office staff to work the claims on-line.

An exceptional claim is a claim that would deny system edits of submitted directly to the Medicaid Fiscal Agent for processing, but the provider thinks that there should be an exception given due to special circumstances. In the past, providers submitted these claims in paper form, and each office scanned and entered them into the Claims Tracking System (CTS).

The original plan was for all field offices to work exceptional claims using the new process. The new system allowed the Agency to reorganize this process into a single Claims Hub office. Now all claims processors are working out of one centralized location, which has led to less quicker processing times.

Estimated Yearly Savings: \$1.675 million

Florida Encounter Exchange and Expanded Benefits Project(s)

Winners: *David Powers, Ross Hart, Michael Boston, Debbie Warfel, Teri Arnoldy, Mary McCullough, Erica Floyd-Thomas, Arlene Elliott, Kelly Rubin*

To improve the Agency's business need for receiving timely and accurate health plan encounter data that supports both capitation rate setting and monitoring of the health plan recipient services, the Encounter Exchange and Expanded Benefit Project Tteam developed and implemented new Florida Medicaid Management Information System (FLMMIS) encounter processing technical architecture.

The Agency needed a robust and informative encounter processing system to provide enhanced tracking and reporting of encounter receipts, processing, and operational functions, as a result of the implementation of the SMMC program and the new contractual health plan requirements. The encounter system redesign addressed the Agency's business requirements to support the SMMC program, which serves over 3 million individuals enrolled in Medicaid at a cost of approximately \$14 billion annually.

Estimated Yearly Savings: \$0-24,999

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The Agency for Health Care Administration is committed to better health care for all Floridians. The Agency administers Florida's Medicaid program, licenses and regulates more than 49,000 health care facilities and 43 health plans, and publishes health care data and statistics at www.FloridaHealthFinder.gov. Additional information about Agency initiatives is available via [Facebook \(AHCAFlorida\)](#), [Twitter \(@AHCA_FL\)](#) and [YouTube \(/AHCAFlorida\)](#).

