IPLARC Monthly Teams
Webinar: 
Wave 1
Monitor IPLARC Billing and Coding

July 15, 2019
1:00 – 2:00 PM
Introductions

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  - Name
  - Role
  - Institution
- If you are only on the phone line, please be sure to let us know so we can note your attendance.

Please enter the name, role and institution of yourself and all those in the room viewing the webinar.
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Call-in info

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Call Overview

• Review of Data/Upcoming Team Talks
• Monitor IPLARC Billing and Coding
• Team Talk: Memorial Hospital of Carbondale
• Team Talk: NorthShore University HealthSystem – Evanston Hospital
• QI Corner
• Round Robin – Comprehensive Contraceptive Counseling
• Next Steps
REVIEW OF DATA/UPCOMING TEAM TALKS
### Aims and Measures

<table>
<thead>
<tr>
<th>Overall Initiative Aim</th>
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<tr>
<td>Within 9 months of initiative start, ≥75% of participating hospitals will be providing immediate postpartum LARC.s.</td>
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<thead>
<tr>
<th>Structure Measures</th>
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<tr>
<td>IT/EMR systems that allow for documentation of IPLARC placement for tracking, and documentation</td>
</tr>
<tr>
<td>Coding / billing strategies in place for reimbursement for IPLARC</td>
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<tr>
<td>IPLARC devices stocked in the inpatient pharmacy</td>
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<tr>
<td>IPLARC protocols in place for labor and delivery and postpartum units</td>
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<tr>
<td>Implemented standardized education materials and counseling protocols* for patients during delivery admission regarding contraceptive options including IPLARC</td>
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<tr>
<td>Communicated launch of IPLARC availability during delivery admission with affiliated prenatal care site and provided sites with provider/staff and patient education materials for contraceptive options counseling, including IPLARC</td>
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<thead>
<tr>
<th>Process Measure</th>
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<tr>
<td>Educated all participating providers/nurses on benefits of IPLARC, protocols, counseling &amp; IPLARC placement</td>
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<tr>
<th>Outcome Measure, among participating hospitals</th>
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<tr>
<td>Provide and document comprehensive contraceptive counseling, including IPLARC, during prenatal care and delivery admission</td>
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<tr>
<td>By increasing access to IPLARC, increase in utilization of IPLARC</td>
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8. Establish consent processes for IPLARC that allows for transfer of consent from prenatal clinic as well as obtaining inpatient consent (see toolkit for examples).

9. Develop educational materials and shared decision making counseling practices to educate patients about the availability of IPLARC as a contraception option (outpatient prenatal care locations, L&D, postpartum) (see toolkit for examples).

10. Educate clinicians, and nurses on informed consent and shared decision making related to IPLARC as well as IPLARC placement and documentation (see toolkit for ILPQC/ACOG training, e-modules, slide decks, education materials).

11. Standardize system / protocol / process flow to assure all patients receive comprehensive contraception choice counseling including IPLARC in affiliated prenatal care sites and during delivery admission, with documentation of counseling.

12. Communicate launch date of hospital’s IPLARC capability to all providers, nurses and affiliated prenatal care sites: communicate protocols, documentation and billing strategies.

13. Track and review IPLARC data, collected monthly through ILPQC REDcap data system with real-time data reports, share data with providers and nurses and review standardized counseling for prenatal sites and labor and delivery and IPLARC uptake, to evaluate program success and sustainability.
<table>
<thead>
<tr>
<th>Month</th>
<th># Teams Entering Data</th>
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<tbody>
<tr>
<td>April – December 2018</td>
<td>16</td>
</tr>
<tr>
<td>January 2019</td>
<td>15</td>
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<tr>
<td>February 2019</td>
<td>14</td>
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<td>March 2019</td>
<td>14</td>
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<td>April 2019</td>
<td>10</td>
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<tr>
<td>May 2019</td>
<td>7</td>
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<tr>
<td>June 2019</td>
<td>1</td>
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</table>

Please continue to submit data through December 2019 to monitor your implementation efforts.
Comprehensive Contraceptive Counseling

Percent of Charts with Contraceptive Counseling, including IPLARC, April 2018-May 2019

- Contraceptive Counseling prenatal
- Contraceptive Counseling L&D
- Goal
Wave 1: IPLARC on Inpatient Formulary

Percent of Wave 1 Hospitals with IUDs on Inpatient Formulary, April 2018-May 2019

Percent of Wave 1 Hospitals with Implants on Inpatient Formulary, April 2018-May 2019
Wave 1: IPLARC Protocols in Place

Percent of Hospitals with Immediate Postpartum Protocols and Process Flows in Place for IUDs, April 2018-May 2019

Percent of Hospitals with Immediate Postpartum Protocols and Process Flows in Place for Implants, April 2018-May 2019
Wave 1: IPLARC Billing Codes

Percent of Hospitals with Billing Codes for IUDs In Place, April 2018 - May 2019

Percent of Hospitals with Billing Codes for Implants In Place, April 2018 - May 2019
Wave 1: IT/EMR Revisions In Place

Percent of Hospitals with IT/EMR Revisions for Tracking and Documentation of IUDs, April 2018-May 2019

Percent of Hospitals with IT/EMR Revisions for Tracking and Documentation of Implants, April 2018-May 2019
Helping all teams go GREEN

We will be reaching out soon to provide one-on-one QI support on structure measures to help all teams get to GREEN!
Physician/Midwife Training on IPLARC Evidence, Protocols, Counseling & Placement, April 2018-May 2019

- Physicians/midwives trained on IPLARC evidence, protocols, counseling & placement
- Physicians/Midwives trained on immediate postpartum IUD placement
- Physicians/Midwives trained on immediate postpartum implant placement

Goal

Review your hospital’s data and connect with providers still needing training about upcoming ACOG IPLARC opportunity 7/29!
## IPLARC Wave 1 Team Talk Schedule

<table>
<thead>
<tr>
<th>Month</th>
<th>Team 1</th>
<th>Team 2</th>
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<tbody>
<tr>
<td>July 15</td>
<td>NorthShore University HealthSystem – Evanston Hospital</td>
<td>Memorial Hospital of Carbondale</td>
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<tr>
<td>August 19</td>
<td>Memorial Medical Center</td>
<td>UIC</td>
</tr>
<tr>
<td>September 16</td>
<td>Advocate Christ Medical Center</td>
<td>Vista Medical Center</td>
</tr>
<tr>
<td>October 21</td>
<td>Advocate Lutheran General</td>
<td>University of Chicago</td>
</tr>
<tr>
<td>November 18</td>
<td>Northwestern</td>
<td>Norwegian American</td>
</tr>
<tr>
<td>December 16</td>
<td>Swedish Covenant</td>
<td>Stroger Hospital</td>
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Wave 1 Team Talks now assigned

- Each Wave 2 team has been assigned a month to share your team’s sustainability progress in a 10 minute Team Talk
  - All teams should have received an email from Danielle on 7/12 with their assigned Team Talk month
  - Can switch with another team if needed

- Every month need a rep from your team to do a short round robin with any brief updates on sustainability progress (no slides) will just be a group discussion of the month’s topic

- We may contact you for mentoring Wave 2 teams when needed:
  - Individual one-on-one support with a matched team
  - Allow Wave 2 teams to contact you for input
  - Share your team’s IPLARC story on Wave 2 team calls (third Monday of the month from 12-1pm)
  - Wave 2 QI topic calls (group discussion of key topic)
MONITOR IPLARC BILLING AND REIMBURSEMENT
We’re LIVE what’s next?

IPLARC Sustainability Plan

1. Monitor and achieve goal >80% for comprehensive contraceptive counseling documentation, including IPLARC
   - All prenatal patients
   - L&D (for patient w/out documented counseling/plan)

2. Ensure patients who desire and are eligible for IPLARC receive it and get early postpartum f/u visit

3. **Monitor IPLARC billing and reimbursement**

4. Implement new hire and ongoing IPLARC education for providers / staff
IPLARC Sustainability Plan

- Complete the sustainability plan and submit to Danielle Young
- Please reach out to Danielle or ILPQC with any questions
- Available on ilpqc.org/IPLARC
Why monitoring IPLARC reimbursement matters

• Lessons learned from other states / hospitals
• Tracking reimbursement early on helps catch small issues and fix them!
• Early fixes prevents big headaches
• Prevents administrative issues if backlog of reimbursement issues discovered
Ongoing Monitoring of Billing/Reimbursement

How is your team implementing long-term monitoring of IPLARC billing/coding?

Did you know you can reach out to ILPQC for billing/coding questions during sustainability? We want to hear from teams about how this is going.
Reimbursement from Private Payers

- BCBS of Illinois is looking to work with hospital teams to reimburse for IPLARC in the inpatient setting
- Connect with your hospital’s BCBS contracts executive for the BCBS account
- Ask for the contract to be amended either as an addendum or as a part of contract renegotiations (depending on when that is). Ask for this specific change to the contract: *Treat intrauterine devices and contraceptive implants as a carve out for hospital inpatient payment modeled like they do for implants or devices.*
Billing/Reimbursement Data as of April 2019 (N=10)

Where are teams at with billing?

- Billed for LARC devices: 70% (Yes), 10% (No), 20% (Not yet placed a device)
- Received reimbursement for IPLARC: 40% (Yes), 40% (No), 20% (Not yet placed a device)

Complete a Billing/Coding CSI with your team and share results with ILPQC for support.
Wondering what happened with reimbursement?

- Consider a Billing/Coding “CSI” Investigation!
- Use your QI/PDSA skills to uncover the breakdown in your team’s billing/coding process that could be leading to claim denials
Billing/Coding CSI

What should we do first?

• Confirm with your hospital’s billing department that the bill for the insertion and device were sent.
• If the cost was different from expected, check the current practitioner fee schedule.

Did you know that you have 180 days from the date of service to file/re-file a claim?
**Billing/Coding CSI**

- Have you reviewed the billing/coding checklist with your teammates?

<table>
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<tr>
<th>Steps</th>
<th>Yes, completed</th>
<th>No, not completed</th>
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<tbody>
<tr>
<td>Hospital documentation before claim:</td>
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<tr>
<td>Identify the patient’s Medicaid/MCO plan</td>
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<tr>
<td>Device ordered and documented in medical record</td>
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<td></td>
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<tr>
<td>Device scanned into MAR and documented by nursing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Device inserted and documented in medical record</td>
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**If practitioner not salaried by hospital, then**

- Appropriate CPT code billed for insertion in addition to delivery charge (this may be done differently by each private provider)

- Practitioner’s individual National Provider Identification (NPI) used

<table>
<thead>
<tr>
<th>Documentation on claim:</th>
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<tr>
<td>Completed the appropriate form:</td>
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<tr>
<td>a) Electronic claim form: 837P</td>
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<td></td>
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<tr>
<td>b) Paper claim form:</td>
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</tr>
<tr>
<td>i. Traditional Medicaid fee-for-service -HFS 2360.</td>
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<tr>
<td>ii. MCO - HCFA 1500</td>
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<tr>
<td>Used hospital’s fee-for-service/facility NPI</td>
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<tr>
<td>Identified the appropriate National Drug Code (NDC)</td>
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<tr>
<td>Billed appropriate device J-code</td>
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<tr>
<td>Included appropriate ICD-10 CM and PCS diagnosis code</td>
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<tr>
<td>Designated place of service (POS) as “in-patient hospital,” POS 21.</td>
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Other helpful tips:

• Look for patterns in claim denials to isolate the problem and expedite reimbursement.
• Was the LARC claim filed separately from the delivery bundle?
• Keep a log in L&D of devices placed and review with billing/coding team members to ensure reimbursement was received for all devices.
• Use other ILPQC IPLARC teams as a resource to help troubleshoot claims questions. It is likely that another team has experienced a similar situation.
• Documentation is helpful – you may report issues with Managed Care Organizations to this online portal.
Who do we contact with questions?

- ILPQC! Email Danielle Young or info@ilpqc.org with your questions – we love questions!

- The Illinois Department of Healthcare and Family Services (HFS), also referred to as state Medicaid, is the appropriate state agency to contact. In July 2015, HFS released guidance outlining the statewide policy to reimburse for immediate postpartum LARC outside of the delivery DRG. **TIP: Identify the patient’s RIN# (Recipient Identification Number) and have it handy when calling HFS to follow-up.**

- If you have a very specific billing related question, email info@ilpqc.org and we will route your question to the appropriate HFS contact.
Many IPLARC teams have achieved billing success. Please let us at ILPQC know if you have an issue with reimbursement and we will work with you to solve the issue.
TEAM TALK: MEMORIAL HOSPITAL OF CARBONDALE
IPLARC

Memorial Hospital of Carbondale
July 2019
Introduction

- Erica Hess MSN, RN-Manager of Women and Children’s Services.

- Graduated with MSN in 2014.

- Graduates with DNP-Executive Leadership in December 2019!!!!
Process

- IPLARC champion, pharmacy, coding, billing, and an Epic support team member continues to meet monthly.

- Created IUD insertion kits for consistency and accuracy.

- Provided provider education.

- Communication is key!!
Reimbursement

- Has received payment, including Medicaid.
- Currently working to renegotiate BCBS contract for payment.
Questions
TEAM TALK: NORTHSHORE UNIVERSITY HEALTHSYSTEM – EVANSTON HOSPITAL
Where we are at: Wave 1

- Currently offering Mirena and Skyla IPLARC IUDs
- Live since November, 2018
- Stocked in L&D (10) and tracked by pharmacy
- To date, 21 Mirena have been placed- most within 10 minutes of placenta delivery-a few within 48 hours of delivery
Billing and Reimbursement

- Only Medicaid patients have received IPLARC.
- Physicians bill through EPIC in the obstetric navigator.
- To date, we have yet to be reimbursed for any IPLARC procedures.
- We will begin to investigate why.
Criteria for Billing for IPLARC met:

- IPLARC device ordered and supplied by our inpatient pharmacy
- Documentation by provider in EPIC (EMR)
- Using fee-for-service NPI and NDC for Mirena as well as ICD-10 diagnosis family planning codes
- Place of service of the procedure is designated as an ‘inpatient’
EDUCATION!!! It is ongoing…

- New residents, staff turnover, clinic staff, etc…
- Grand Rounds for providers
- Poster presentation for nursing staff on all units
- Pt education pamphlet in English and Spanish
- Commercial insurance patients need to know IPLARC exists and call to plea why they deserve coverage too
IPLARC POSTER

RN Education
QI CORNER
IPLARC QI Opportunity

- Hospital went **LIVE** with IUDs and Nexplanon in January 2019 and things are going well, but unsure about reimbursement.
- Team met in July for bi-monthly IPLARC Sustainability Meeting and decided to perform a “CSI”
- Reviewed ILPQC’s slide set along with the ILPQC’s Billing /Coding checklist with one patient case.
IPLARC QI Opportunity

- Confirmed with their billing dept. that the bill for insertion and device were sent
- Bill was sent and payment was made
- Discovered that the reimbursement rate was $660 but the cost for the device was $755.

- ILPQC asked Medicaid to update their fee schedule
- ILPQC learned that there was a discrepancy in the HFS fee schedule.
- Brought issue of losing $100 per device to ILPQC

The team’s cost were able to be retroactively adjusted and full reimbursement was made.

It is worth doing an investigation. Please do not hesitate to reach out to ILPQC- we are here to help!
ROUND ROBIN – TEAMS UPDATE ON PROGRESS TOWARDS GO LIVE GOAL
Round Robin Guidelines

• What are your challenges and success stories about IPLARC Billing/reimbursement?
• What questions about billing/coding does your team have?
• Please share any other successes and updates from your team
UPCOMING EVENTS AND NEXT STEPS
ACOG IPLARC Training

• **Next Opportunity:** July 29, Northwestern, Chicago, IL
• Register here: [www.ilpqc.eventbrite.com](http://www.ilpqc.eventbrite.com)
• Training will cover:
  – Capacity building
  – Contraceptive counseling
  – Insertion training
• Each team should have at least one representative(s) attend one of the two trainings (ideally a provider and a nurse attend from each team)
IPLARC Sustainability

Don’t forget to submit your team’s Sustainability Plan!

- Monitor & Achieve Goal >80% for Comprehensive Contraception Counseling Documentation
- Ensure patients who desire & eligible for IPLARC receive it and get early postpartum follow up visit
- Monitor IPLARC billing and reimbursement
- Implement new hire and ongoing IPLARC education for providers / staff
Next Steps

• Submit outstanding data for April, May & June
• Review the team talk schedule and mark your calendar or let ILPQC know ASAP if you are unavailable for your assigned month
• Complete an IPLARC sustainability plan for your team and share with Danielle or info@ilpqc.org
• Look for an upcoming email from Danielle about QI support!
• **Consider a review of your team’s billing/coding/reimbursement data and reach out to ILPQC to troubleshoot any issues**
• Continue monthly team meetings & data report review
• Consider plan for new hire & ongoing provider/staff IPLARC education
• Continue to work on improving and monitoring comprehensive contraceptive counseling on L&D and prenatal
Contact

• Email info@ilpqc.org
• Visit us at www.ilpqc.org