

Health Care Reform Review Committee
Rep. George Keiser, Chair
Nov. 10, 2015
“Patient Financial Advocacy”

Chairman Keiser and members of the Health Care Reform Review Committee: Thank you for the opportunity to overview the work Sanford Health is doing to help uninsured and underinsured patients secure healthcare coverage.

Our work to offer this service in the Bismarck region began in the spring of 2014. Despite the legislature’s approval of Medicaid Expansion, we were not seeing drops in our uninsured and underinsured patient volumes. After much discussion we piloted a project to measure the resource investment required to adequately help patients navigate the process of securing coverage.

The project quickly demonstrated a strong return on investment not only financially but also in terms of patient satisfaction and engagement.

Because of our tremendous staffing shortage, we chose to contract with an outside vendor to secure and train patient financial advocates to work within our system. Two full-time advocates began work May 2015; a third advocate is slated to begin work December 2015.

The enrollment process often begins bedside. We created a queue within our electronic health record that allows the financial advocates to view admitted patients who may want or need help. Our advocates visit with the patient and/or the patient’s family to secure as much information as possible for the application, following up with the patient after discharge if more information is needed.

In our first six months of work (5/9/15 thru 11/9/15), the team has secured 2,270 coverage approvals. Of the 2,270 certifications, 2,005 (88.3%) were Medicaid and Medicaid Expansion.

The breakdown of coverage secured for patients is as follows: Medicaid (1,465), Medicaid Expansion (540), Medicare (112), South Dakota Medicaid (88), private coverage (28), Minnesota Medicaid (18), Nevada Medicaid (9), Florida Medicaid (3), Idaho Medicaid (2), Children's Health Insurance Program (2), New Mexico Medicaid (2), Wisconsin Medicaid (1), Oklahoma Medicaid (1) and Tricare (1).

Chairman Keiser requested specific data regarding enrollment of Native American patients. To date we have screened 490 Native American patients that appear to be eligible for additional coverage; of those 156 have been approved for coverage and 234 are in process.

Future goals for this program are to expand the advocates' scope to encompass the emergency department and clinic patients.

Thank you. I would be happy to answer any questions you may have.

Sincerely,
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