



Patient Level Payment System in Ireland

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Agenda

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- ▶ Introduction and Background
- ▶ The Issue/Problem
- ▶ The Access to Care Portal details
- ▶ Results
- ▶ Challenges
- ▶ Conclusions



Background on Ireland

	Ireland
▶ Land area	84421 km ²
▶ Population	5.127M
▶ Healthcare spend (%GDP)	6.73
▶ Healthcare spend (per capita)	6047 (17 th)
▶ # of Pubic Hospitals	55
▶ # of Private Hospitals	19
▶ Coastline	3172Km
▶ Highest Point	1038m
▶ Covid Cases (per 1M)	345521



Background on Ireland (comparison)

	Ireland	Slovenia
▶ Land area	84421 km ²	20271 km ²
▶ Population	5.127M	2.112M
▶ Healthcare spend (%GDP)	6.73	9.15
▶ Healthcare spend (per capita)	6047 (17 th)	4114 (31 st)
▶ # of Pubic Hospitals	55	19
▶ # of Private Hospitals	19	8
▶ Coastline	3172Km	47Km
▶ Highest Point	1038m	2864m
▶ Covid Cases (per 1M)	345521	652803





Overview of Procured Activity (not Covid19)

- ▶ HSE funds public hospitals in Ireland
 - ▶ Activity Based Funding Inpatient/Daycase
 - ▶ Block Funding Other (Outpatient/ED etc)
- ▶ HSE also fund specific initiatives to address capacity and waiting list
 - ▶ Funding for outsourcing initiatives
 - ▶ Funding for insourcing initiatives
 - ▶ Funding for waiting list management initiatives.
 - ▶ Funding for Medical Beds
 - ▶ Other funding.
- ▶ Payment is difficult to arrange and complicated
- ▶ Reporting is poor or non-existent



Key Concepts

- ▶ Waiting List List of patients waiting for treatment as either a daycase, inpatient or outpatient.
- ▶ UAN A unique authorisation number which is a commitment to pay for the treatment of the referred patient
- ▶ Product One of over 2000 procedures procured from private hospitals
- ▶ Claim Submitted by Private hospital and consists of an claim form and an invoice.

Claims have an expected cost but outliers are allowed
- ▶ Adjudication Can be done automatically or manually



System Components

1. Waiting List Import
Users can access the latest Irish waiting list data
2. Access to Care Portal
Public Hospitals can refer patients and create UANs (unique authorisation number)
3. HSEClaims system
Private Hospital can submit claims and upload invoices
4. Claims Management System
HSE can adjudicate on cases where needed.
5. Payment System
Payment is made directly to the Private Hospital/Vendor via EFT
6. Reporting System



Overall Process

1. Patient is selected for referral
2. UAN created in the Access To Care portal for the patient
3. The patient is transferred to the private hospital or vendor
4. The patient is contacted, admitted, treated and discharged
5. The private vendor submits a claim
6. The HSE claims management function adjudicates the claim
7. The claim is paid via HSE finance system (SAP)
8. Reporting



Overall Process - Components

- | | |
|---|------------------------------|
| 1. Patient is selected for referral | Waiting List |
| 2. UAN created in the Access To Care portal for the patient | Access To Care Portal |
| 3. The patient is transferred to the private hospital or vendor | |
| 4. The patient is contacted, admitted, treated and discharged | |
| 5. The private vendor submits a claim | HSEClaims System |
| 6. The HSE claims management function adjudicates the claim | Claims Management |
| 7. The claim is paid via HSE finance system (SAP) | Payment System |
| 8. Reporting | Reporting System |



Different Types of Referrals

- ▶ **Surgical Services**
Patients referred for daycase / inpatient care in a private hospital
- ▶ **Outpatients**
Patients referred for outpatient care in private vendors for specific specialtys
- ▶ **Medical beds**
Patients referred for the use of Medical Beds in a private hospital
- ▶ **Other Recurrent funding**
Patients referred under one or more of a series of waiting list funding projects
- ▶ **Assisted Human Reproduction**
Patients referred to private vendors for specific procedures



Key Features of the System

Ease of Use

Flexible

Expandable

Transparent

Auditable

Reportable

Connected

Procurement Compliant



Access To Care Portal

Access to Care Portal [5.0.14] TEST System

University Test Hospital

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Dashboard (Advanced)

+ ADD SEND BATCH EMAILS

Name	Mrn	Proce	Waitli	Priva	UAN	Has Public H	Has Private P	
> ExampL...	77887...	[NREC...	869 Da...			X	X	VIEW EDIT [X] [0] [DS] [M]
> ExampL...	87748...	Non-Re...	1000 D...		N6990...	X	X	VIEW EDIT [X] [0] [DS] [M]
> Patient...	T900703	Non-Re...	22 Day...		N6990...	X	X	VIEW EDIT [X] [0] [DS] [M]
> Patient...	T884933	Non-Re...	36 Day...		N6990...	X	X	VIEW EDIT [X] [0] [DS] [M]
> Patient...	T818015	Non-Re...	206 Da...		N6990...	X	X	VIEW EDIT [X] [0] [DS] [M]



Access To Care Portal

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Access to Care Portal [5.0.14] TEST System University Test Hospital brian.mccarthy@hpo.ie

Access To Care

Budget: Access to Care

Name: John Example Mrn: A12345678 WAITING LIST

Patient Type: Adult Date of Birth: 01/04/2021

Product: Total Knee Replacement adult unilateral

Clinical Priority: Urgent

Date Patient placed on waiting list: 10/11/2021 921 Days Treatment Type: Inpatient

Referring Consultant: Surgeon (General Surgery)

Clinical Suitability: Yes

Hospital: Patient Approved?: Private Hospital Approved?:



Access To Care Portal – Bulk Upload

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Access to Care Portal [5.0.14] TEST System University Test Hospital brian.mccarthy@hpo.ie

Bulk Upload - Outpatients

Product Speciality: Dermatology

Treatment Hospital/Vendor:

Only show cases with the product speciality:

Patient Information File: No file chosen

PREVIEW - OP IMPORTED CASES ARCHIVE

Name	Mrn	Episode No.	Speciality	Status Description	Process Status
No data					



Data Entry | pndcmclidbs02.healthirl.net/claims_test/data_entry.htm

HSEClaimsForm v.2.0 (2024-01-10)

Logout

View All Claims | Search By UAN / MRN / Claim Status | View Totals

UAN	MRN	Adm	Dis	Status	Open	View	Invoice	Pat File	Product	UAN Date
				In draft - Initial record	Open	View	Invoice	File Recv	1326 Litholapaxy of bladder	17/04/2024
				In draft - Initial record	Open	View	Invoice	File Recv	1323 Endoscopic administration of agent into bladd...	16/04/2024
				In draft - Initial record	Open	View	Invoice	File Recv	1790 Removal of 1 tooth or part(s) thereof	12/04/2024
				In draft - Initial record	Open	View	Invoice	File Recv	1334 Endoscopic biopsy of prostate	11/04/2024
				In draft - Initial record	Open	View	Invoice	File Recv	1334 Endoscopic biopsy of prostate	11/04/2024
				In draft - Initial record	Open	View	Invoice	File Recv	1334 Endoscopic biopsy of prostate	11/04/2024
				In draft - Initial record	Open	View	Invoice	File Recv	1334 Endoscopic biopsy of prostate	11/04/2024
				In draft - Initial record	Open	View	Invoice	File Recv	1334 Endoscopic biopsy of prostate	11/04/2024
				In draft - Initial record	Open	View	Invoice	File Recv	1534 Correction of ptosis of eyelid by other techn...	10/04/2024



Data Entry | pndcmclidbs02.healthirl.net/claims_test/data_entry.htm

*** confidential Information ***

Hospital / Admin Section

Hospital* (* Mandatory Field)

UAN* P30300010059

Case reference / MRN*

Referral Source

Referring Hospital (if referred from Public Hospital)

Date Patient File Received / /

Admission Date* / /

Discharge Date* / /

Sex* [?](#)

Date of Birth* (omit day) / /

Area of Residence* [?](#)

Eircode (Routing key)



Reporting Systems

- ▶ Reporting on the system is extensive
 - ▶ Full daily report on UANs and HSEclaims for all cases in the system
 - ▶ Daily report on all referrals to each private hospitals
 - ▶ Warning report on budgets to public hospitals
 - ▶ Financial information for the current year for accounting purposes.
 - ▶ Report on the operation of HSEClaims for monitoring and audit by HSE Acutes
 - ▶ Overview of the UAN system for monitoring and audit by HSE Acutes
 - ▶ Weekly report on UANs by hospital group prepared for EY



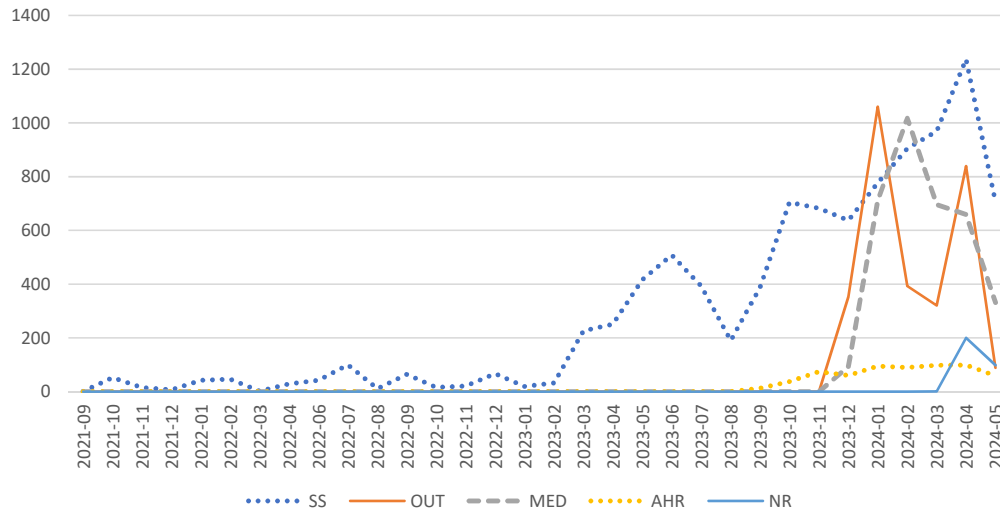
Some Results

Totals /Percentages	SS	Out	AHR	Med	Non Rec
UAN starting letter	P	X	F	M	N
# of Referrals	9554	3055	625	3507	299
# of Referrals YTD	4592	2702	441	3414	299
# of Claims	5891	278	293	2513	1
# of Claims YTD	1933	194	141	2443	1
Value of Claims (€ ,000)	56903	213	1445	27575	9
Value of Claims YTD (€ ,000)	18478	108	683	26437	9
# of Referring Hospital	14	5	6	21	1
# of Treating Hospitals/vendors	14	3	9	13	1

SS: Surgical Services, Out: Outpatient, AHR: Assisted Human Reproduction, Med: Medical Beds, Non Rec: Non Recurrent



Results – Referrals by Month



SS: Surgical Services, Out: Outpatient, AHR: Assisted Human Reproduction, Med: Medical Beds, Non Rec: Non Recurrent



Challenges

- ▶ Business models of private vendors are different to public hospitals
 - ▶ Staff turnover issues
 - ▶ Connection issues
 - ▶ Timely data
- ▶ The database and system have evolved as the Access to Care portal has expanded.
 - ▶ “Fixing the plane while in the air”
- ▶ Due to the possibility of fraud, the controls around the setup of vendors are very strict
 - ▶ This is understandable but can cause delays
- ▶ Claims data is not coded



In Conclusion

- ▶ The Access to Care Portal and HSEclaims systems were designed to solve the issue of how to pay for procured activity
- ▶ Solution
 - ▶ Access to Care Portal / HseClaims system and related systems
 - ▶ A Flexible expandable auditable system that is procurement compliant
- ▶ The system continues to evolve
 - ▶ Further expansion into non-recurrent funding
 - ▶ Additional reporting
- ▶ This evolution continues while keeping the core functionality allowing patients to be referred, admitted, treated, discharged and paid for.
- ▶ Thank you.