



Singapore Healthcare
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Reduction in CPF Mediclaim Queries

Tan Beng Ho, TTSH
Sarbjit Kaur, Sentamilselvi, Joyce Yong
Yvonne Aw, Botuyan Levi, Valerie Chan
Ramanujam Lakshmi, Khng Hwee Peng
Clinical Coding Unit /HIS

Introduction

Mediclaim coders submit all inpatient /day operations diagnosis codes to CPF* board for medisave/insurance claims upon patient's discharge. Bills are processed by CPF board, and if there is discrepancy with the diagnosis/surgical codes, CPF Mediclaims queries will be raised. An average of 102 queries were received per month. Mediclaim coders will then need to verify and resubmit the codes promptly for the finalized bill to be generated on time for patient, hospital and insurance claimant.

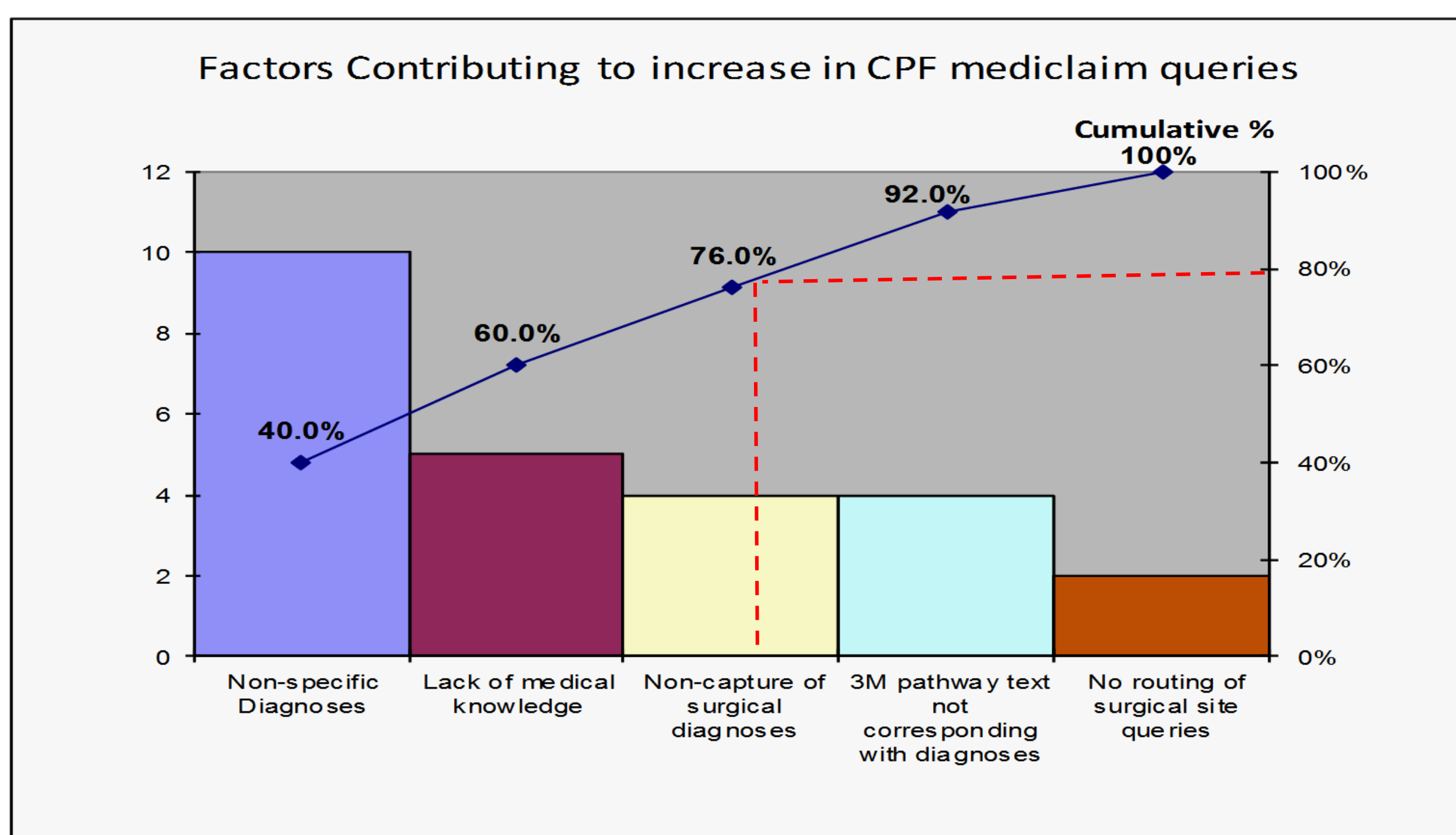
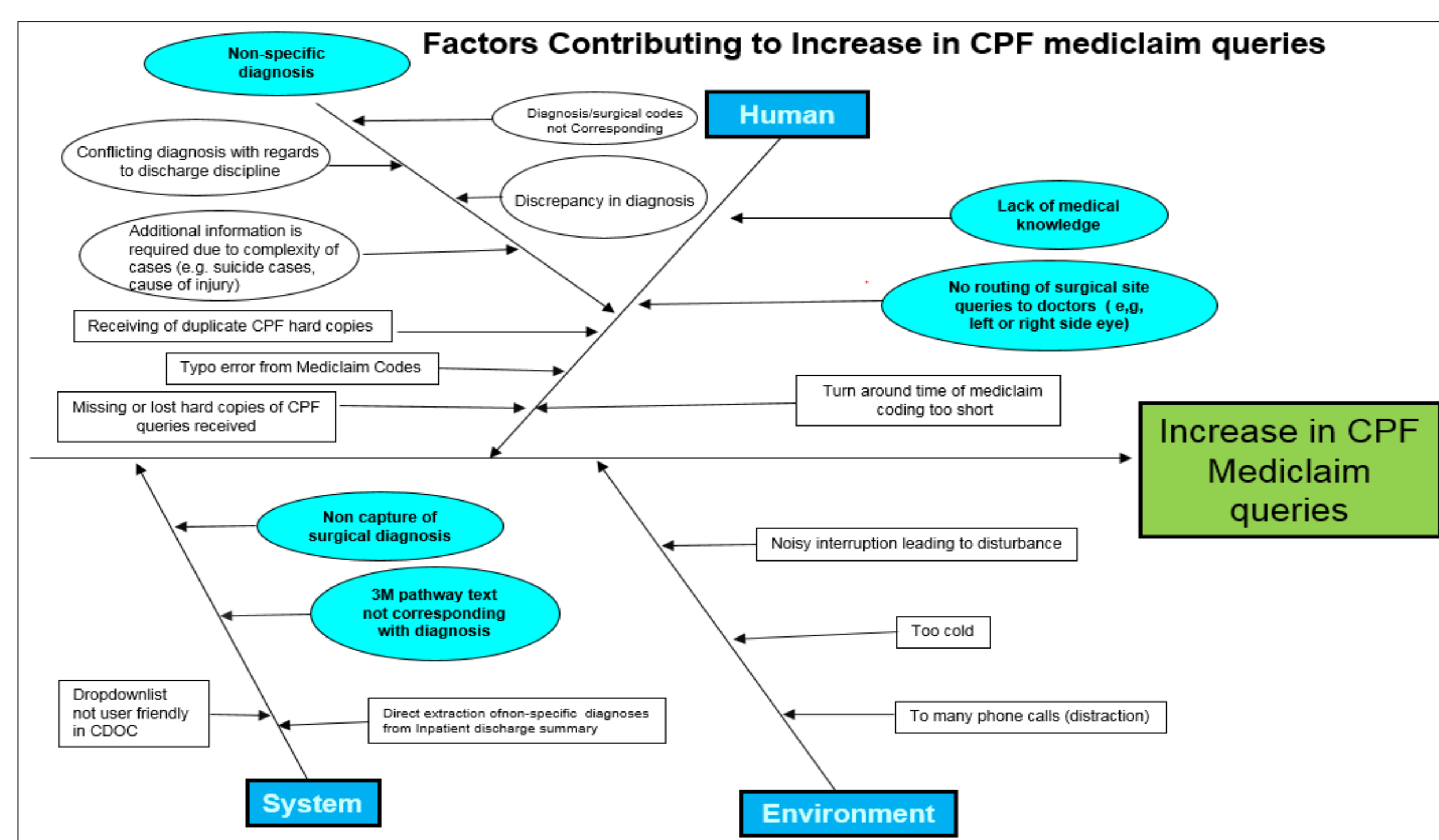
*Central Provision Fund

Objectives

- To reduce CPF queries related to Mediclaim coding by 20% within 6 months from May 2018 to Oct 2018.
- Eliminate re-coding and re-submission of diagnosis code to CPF board for faster turnaround claiming of bill for patient, insurer and hospital.

Methodology

- With CIPIP methodology, the team conducted a gap analysis using the cause-and-effect diagram to identify the root causes and the pareto chart to group the most important factors that should be addressed first.

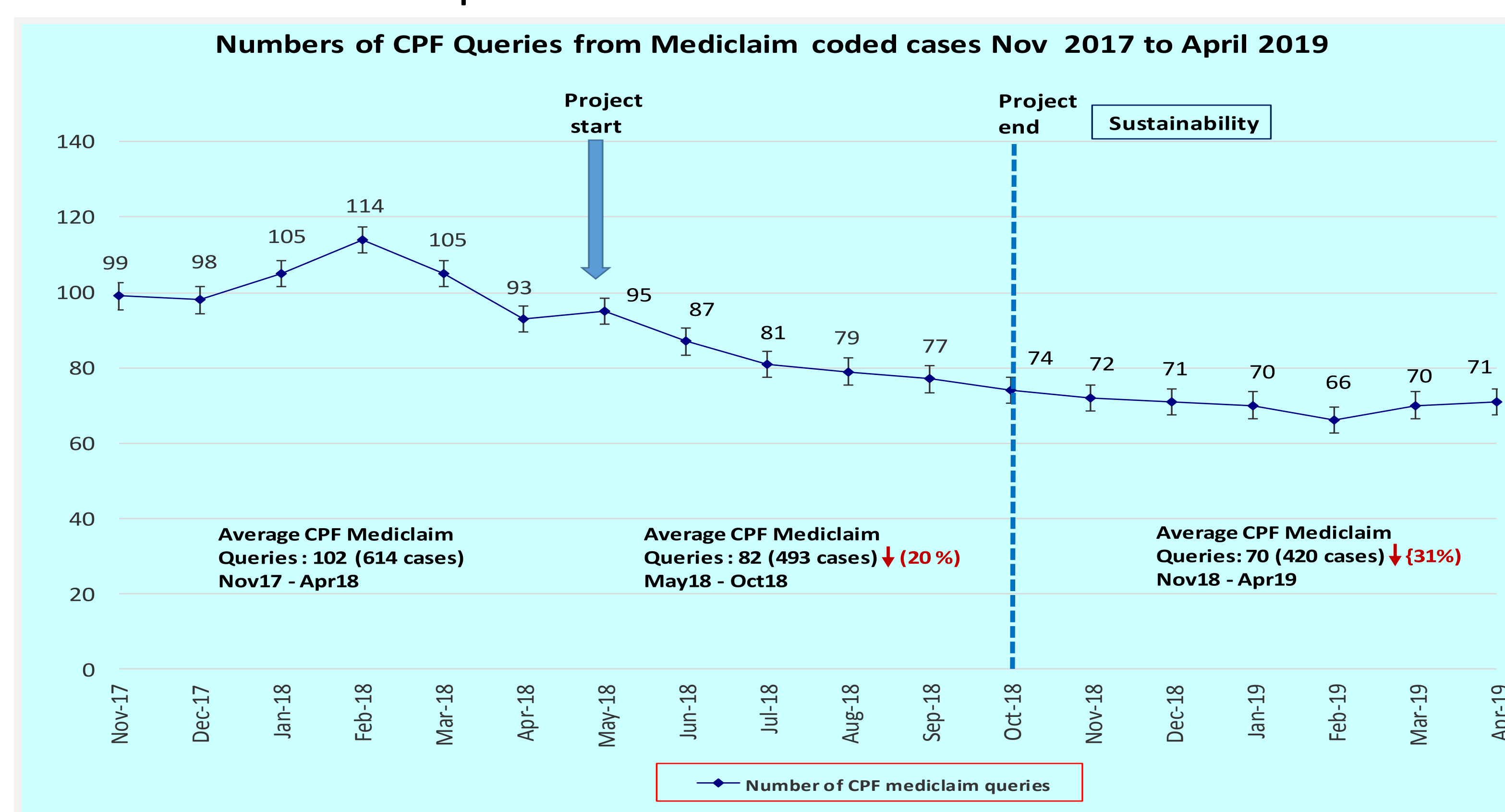


- A solutions approach was used and evaluated at the experimental phase to test the change and further refined toward full-scale implementation which:
 - Focus on core process
 - Review and enhancing the study session
 - Develop coding reference guide & template

Results

Through the team's efforts, the following results were achieved;

- Number of CPF Mediclaim queries were reduced by 20% within 6 months from May to October 2018, from a monthly average of 102 cases to 82 cases per month.



- With the implementation of coding reference guideline, staff are more confident in assigning the correct diagnosis code, the Mediclaim coding errors have reduced from 2.3% in May 2018 to 0.9% in Oct 2018.

Coding reference guideline & Standard Template

	Non-specific Diagnosis	Coding solution
1	Altered Mental State (AMS)	To code the underlying cause if there is linkage If no cause, code to R688 (Other specified general symptoms & sign)
2	Fluid Overload	To code the underlying cause e.g. CCF, ESRF
3	Fall	To code underlying cause. No cause, to code R296 (Tendency to fall).
4	Trauma	To code more severe injury. e.g. fracture, artery, nerve & tendon
5	Fracture	To code specific site by referring to radiological report and discharge summary issues section.
6	Obesity	To code as metabolic disorder
7	Drug Overdose	Default to accidental unless documented as suicidal by doctors.
8	Abdominal pain	To check the operative notes e.g. appendicitis, colonic polyp
9	Abscess/Ulcer	To check for the site
10	Cancer	To check for the primary and secondary site

Standard Template for CPF Mediclaim Queries

Drug Provocation Test

3M Pathway text not corresponding with diagnoses

Patient came in for Drug allergy evaluation, and Skin prick Test.

The codes applied are:

- Z036- Observation for suspected toxic effect from ingested substance
- Z015 - Diagnostic skin and sensitization tests
- Patient's condition is spontaneous and there is no cause of injury
- Patient was admitted for medical reasons.

The patient was **not treated** for the following reasons:

- Treatment of Intentional self-injury or injuries resulting from attempted suicide
- Treatment for drug addiction or alcoholism
- workmen Injury

- The reduction in CPF Mediclaim queries have resulted in a time saving of 25min/average case (replying queries and re-coding) which is equivalent to a saving of 6.3 working days for 121 cases (May18-Oct18).
(121 cases x 25min/case = 3,025min/60min = 50.4hr/8hr/day = 6.3days)

Conclusion

Learning Value: The project has provided better insights and broadened the staff perspectives, that with the right solution to the root causes, an effective plan and a series of small scale changes can result in great achievement. The team also recognised the value of standardisation that could enhance capabilities, empowering them with confidence to do the job differently. In order to sustain this improvement, continuous learning is key and, an ongoing measurements and audits should be conducted to ensure data integrity and sustainability.