Project Title

Emergency Department AR

Project Lead and Members

Project lead: Joyce Loke

Project members: Norman Ng Chee Keong, Bay Swee Ling, Foo Jia Ming , Rayner Heah, Nurliyana Binte Mohamed Yatim, Siti Aisyah Firda Mohd Zaini

Organisation(s) Involved

Ng Teng Fong General Hospital

Healthcare Family Group(s) Involved in this Project

Healthcare Administration

Applicable Specialty or Discipline

Pharmacy, Healthcare Administrators

Project Period

Start date: Jan 2023

Completed date: Jun 2023

Aims

To reduce the AR rate to pre-covid period i.e. 12.6% within the next FY.

Background

See poster appended/ below

Methods

See poster appended/ below

Results

See poster appended/ below

Lessons Learnt

The department can deep dive into maintaining sustainability on such measures and sharing the organizations' AR towards the ground staffs for awareness. This can help them understand better on the initiatives and visibility on the results behind their efforts.

Conclusion

See poster appended/ below

Project Category

Care & Process Redesign

Risk Management, Cost Recovery, Productivity, Cost Saving

Keywords

Emergency Department, Account Receivable (AR), Payment, Cost Recovery

Name and Email of Project Contact Person(s)

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Emergency Department AR

MEMBERS: JOYCE LOKE, NORMAN NG CHEE KEONG, BAY SWEE LING, FOO JIA MING, RAYNER HEAH, NURLIYANA BINTE MOHAMED YATIM, SITI AISYAH FIRDA MOHD ZAINI

- ☐ SAFETY
- ☐ QUALITY
- ✓ PATIENT EXPERIENCE
- ✓ PRODUCTIVITY
- ✓ COST

Define Problem, Set Aim

Problem/Opportunity for Improvement

Since Mar 2019, the bad debts for the hospital has increased over the years of which account receivable (AR) rate for ED had been increasing over the years from 12.6% in FY18 till 23.8% in FY22. While hospitals are responsible for providing medical care to populations, revenue collection must be maintained to ensure sustainability to support operation, care accessibility and care quality.

Patients tend to indicate they will make payment at home/ online at point of discharge, and subsequently not do so promptly.
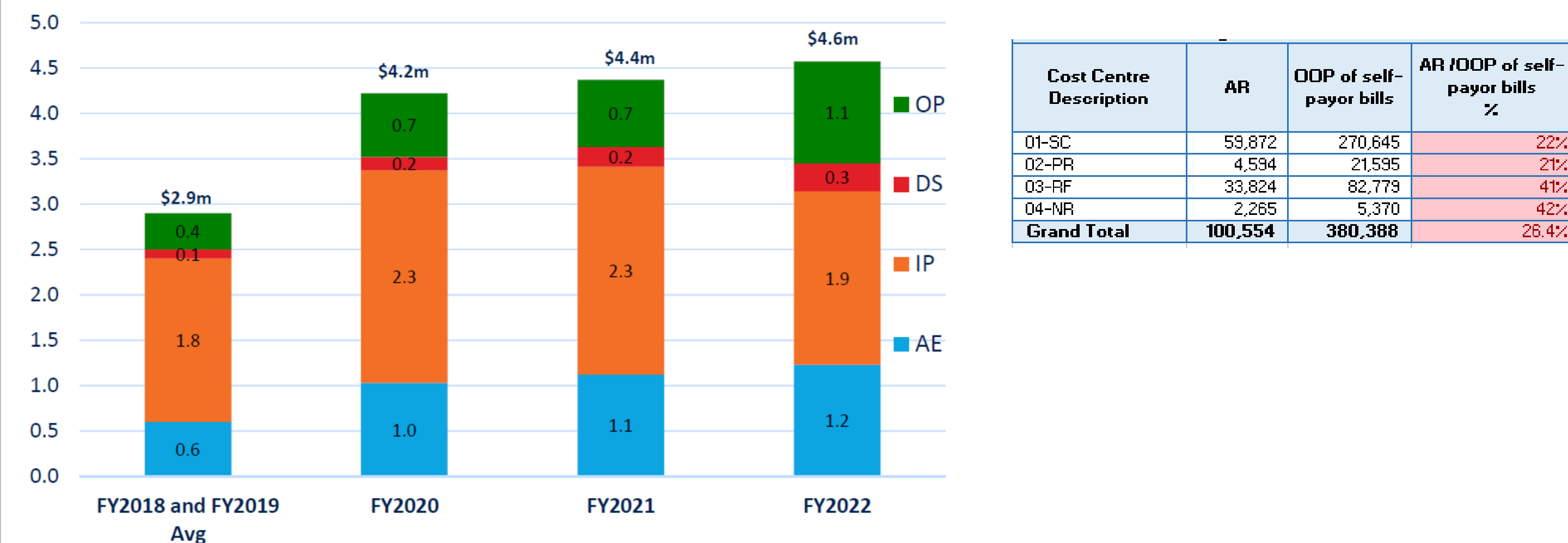
Aim

To reduce the AR rate to pre-covid period i.e.. 12.6% within the next FY.
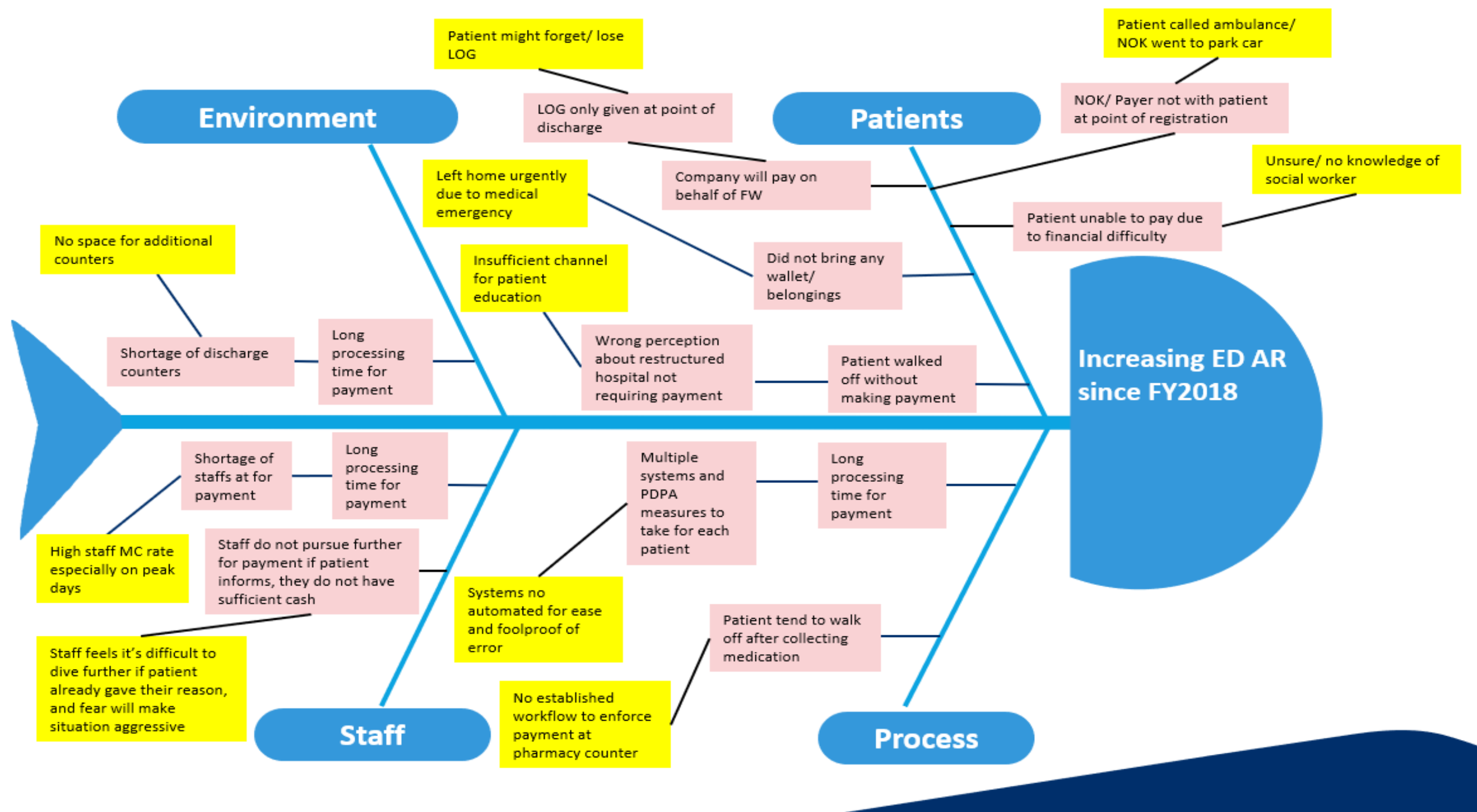
Establish Measures

The measures are based on these two key factors:
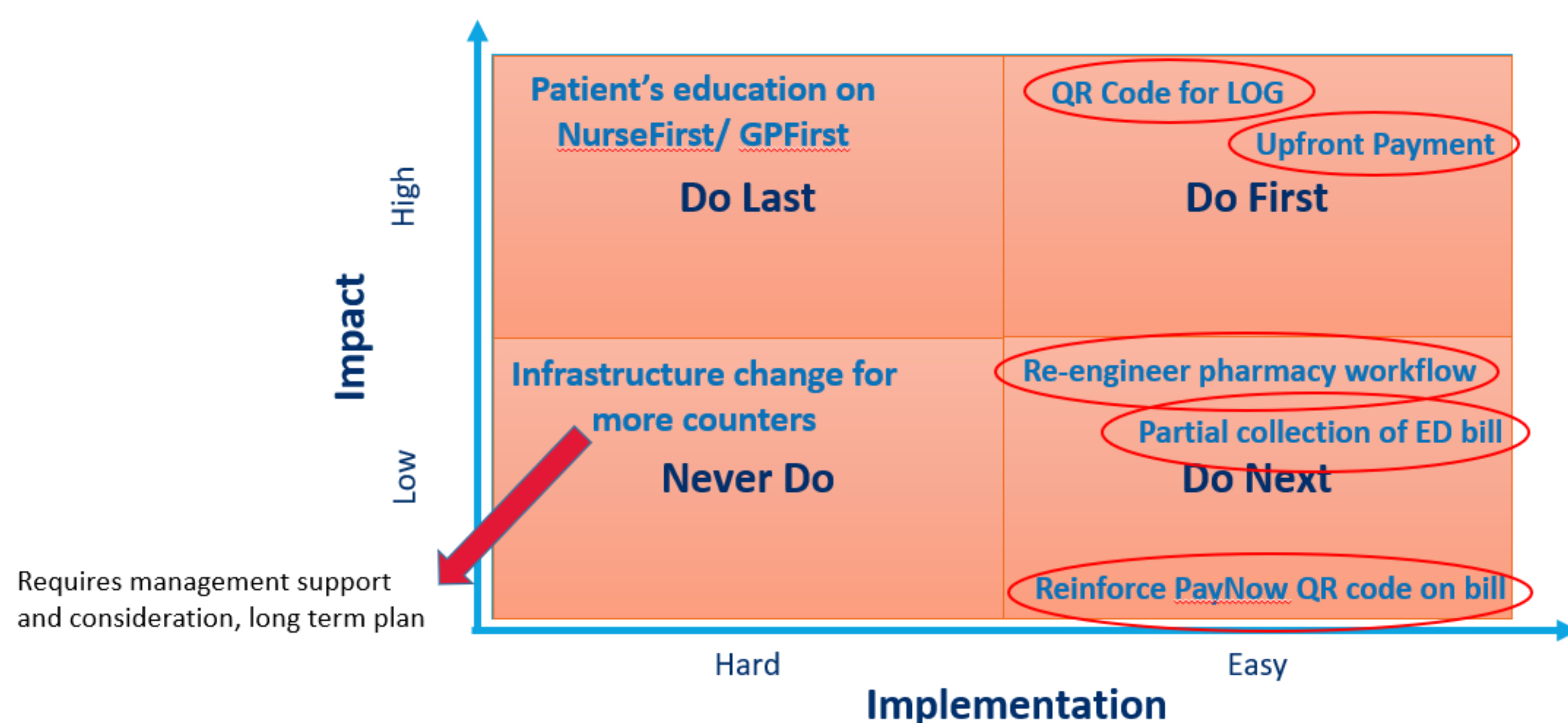1) Departmental AR rate
2) Affected patient's demographics

Cost Centre Description	AR	OOP of self-payor bills	AR /OOP of self-payor bills %
01-SC	59,872	270,645	22%
02-PR	4,534	21,595	21%
03-RF	33,824	82,779	41%
04-NR	2,265	5,370	42%
Grand Total	100,554	380,388	26.4%

Analyse Problem

Select Changes

Various interventions were brainstormed with the team and the grounds. The different probable solutions were evaluated on the feasibility and impact, and the team decided on the solutions in red which can address the key constraints.

Test & Implement Changes

How do we pilot the changes? What are the initial results?

CYCLE	PLAN	DO	STUDY	ACT
1	*Reduction of ED's AR*	**Self-Payment Kiosk** In Jan 2022, ED was made involved and expressed interest in Self-Payment Kiosk, in effort to reduce ED'S AR and enhance patient's experience. From Jan – Jul 2022, different stakeholders were engaged to undergo discussion and testing. It was deployed for live usage on 27 Jul 2022.	Kiosk usage data is being monitored (~100/month), and AR is seen improving slowly through the months.	Patient experience has been enhanced with them not requiring to wait for discharge counter to make payment before heading home.
		Partial Collection of ED Bill In Apr 2023, ED Ops team created a partial payment collection tracking sheet that PSAs are able to use to input details of partial payment collection by patients.	The data is able to help us decipher the demographic of patients whom are more likely to not make full payment on their bills	The tracking sheet aids ED Ops team in planning measures to target specific demographic groups of patients in reduction of AR
		QR Code for LOG In May 2023, ED Ops team created a QR code that links to our corporate LOG. This helps foreign workers as they will be able to send the LOG to their employers during their visit instead of after.	From the partial payment collection, the amount of FW indicating company would pay post visit has reduce from 250~/month pre-LOG QR code implementation, to 70~/month	PSAs/ED Ops team is able to receive LOG before the end of patient's visit
		Upfront Payment From 8 Feb 2023, ED has implemented upfront payment collection.	AR for ED is being monitored and has dropped from 27.4% in February 2023, to 23.8% in March 2023.	With upfront payment collection, we're able to settle the patient's standard ED attendance fee prior to discharge
		Workflow with Pharmacy Implemented on 10 Aug 2023, patients will now make payment at discharge counter first before collecting medication at Pharmacy counter.	AR will be monitored moving forward.	The re-engineered workflow helps ensure that payment has been made by patient before collecting medication

Results

ED's AR has been on a downtrend, from 27% in Jan/ Feb'23 to 23% in Jun'23.
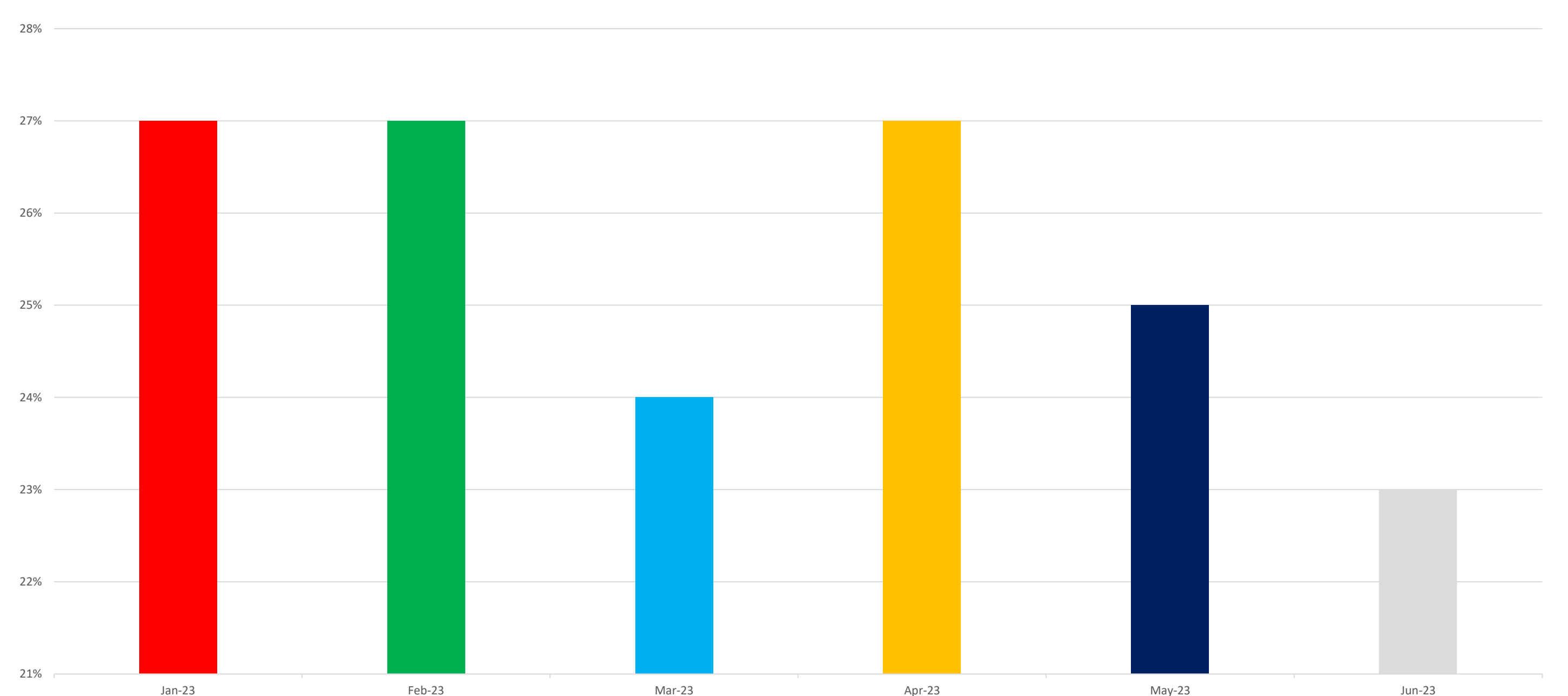
Spread Changes, Learning Points

The department can deep dive into maintaining sustainability on such measures and sharing the organizations' AR towards the ground staffs for awareness. This can help them understand better on the initiatives and visibility on the results behind their efforts.

Ng Teng Fong General Hospital

Jurong Community Hospital