

Timeliness of Complaint Processing: A Process Improvement Story



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Who we are

- Blue Cross and Blue Shield of New Mexico, Albuquerque
- A division of Health Care Service Corporation: BCBS Plans in Illinois, Texas, New Mexico; 9.4 million members, largest not-for-profit, non-investor owned Blues plan



Who we are

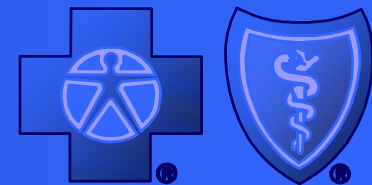
- Quality Management and Improvement Department for BCBS New Mexico
- Responsibility: we process and resolve quality of care issues that arise from member complaints or internal concerns regarding quality of care provided to members



NM Department of Insurance (NMDOI)

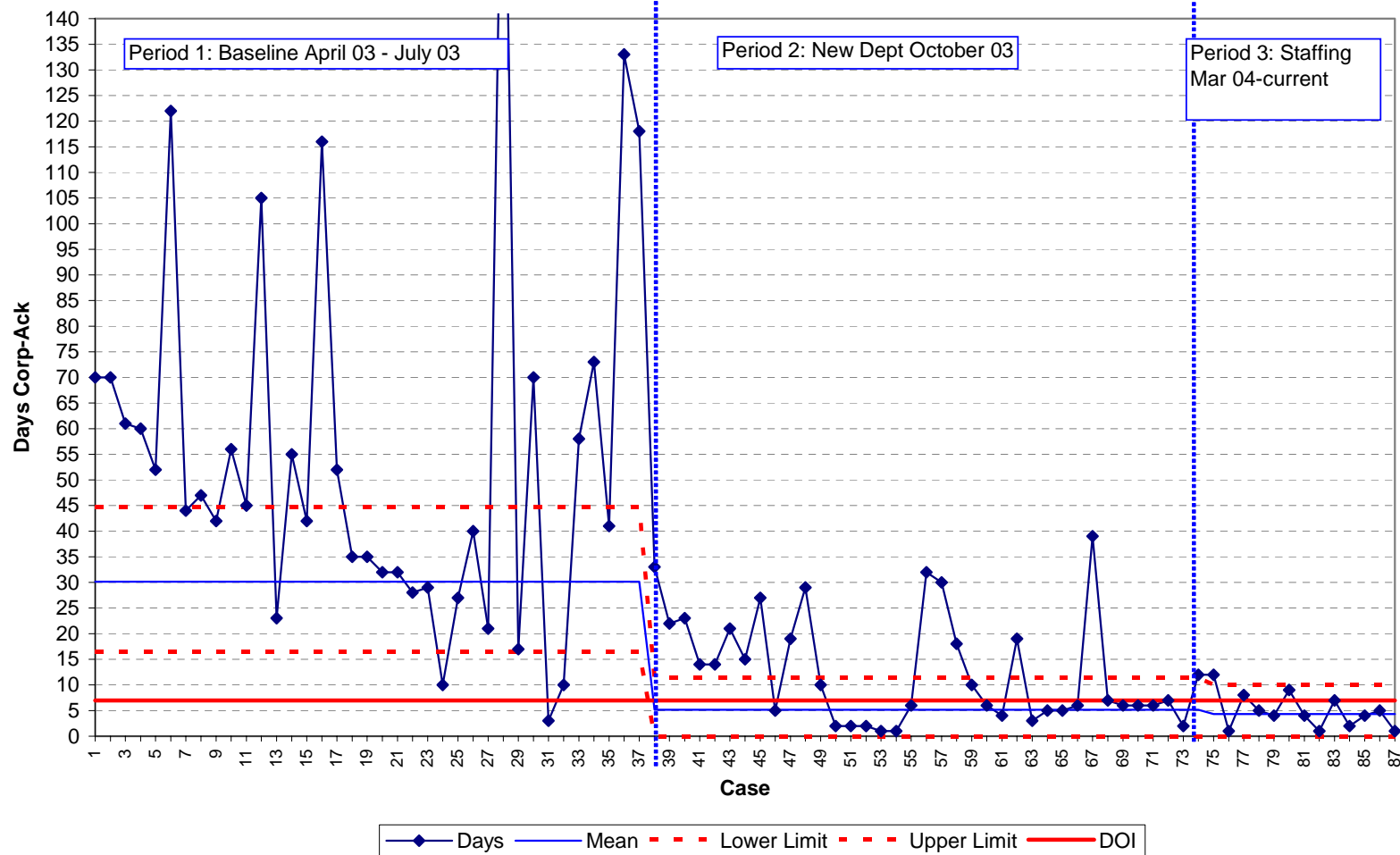
A LOUD “voice of the customer”

- NM DOI regulations require no more than 7 calendar days from receipt of a member complaint to the time the member’s complaint is acknowledged. (“Specification”)
- Lack of data on how we were meeting this specification
- Analogy: “death” – Defects (i.e. >7 day turnaround) would be a relatively rare event that is irreversible and serious



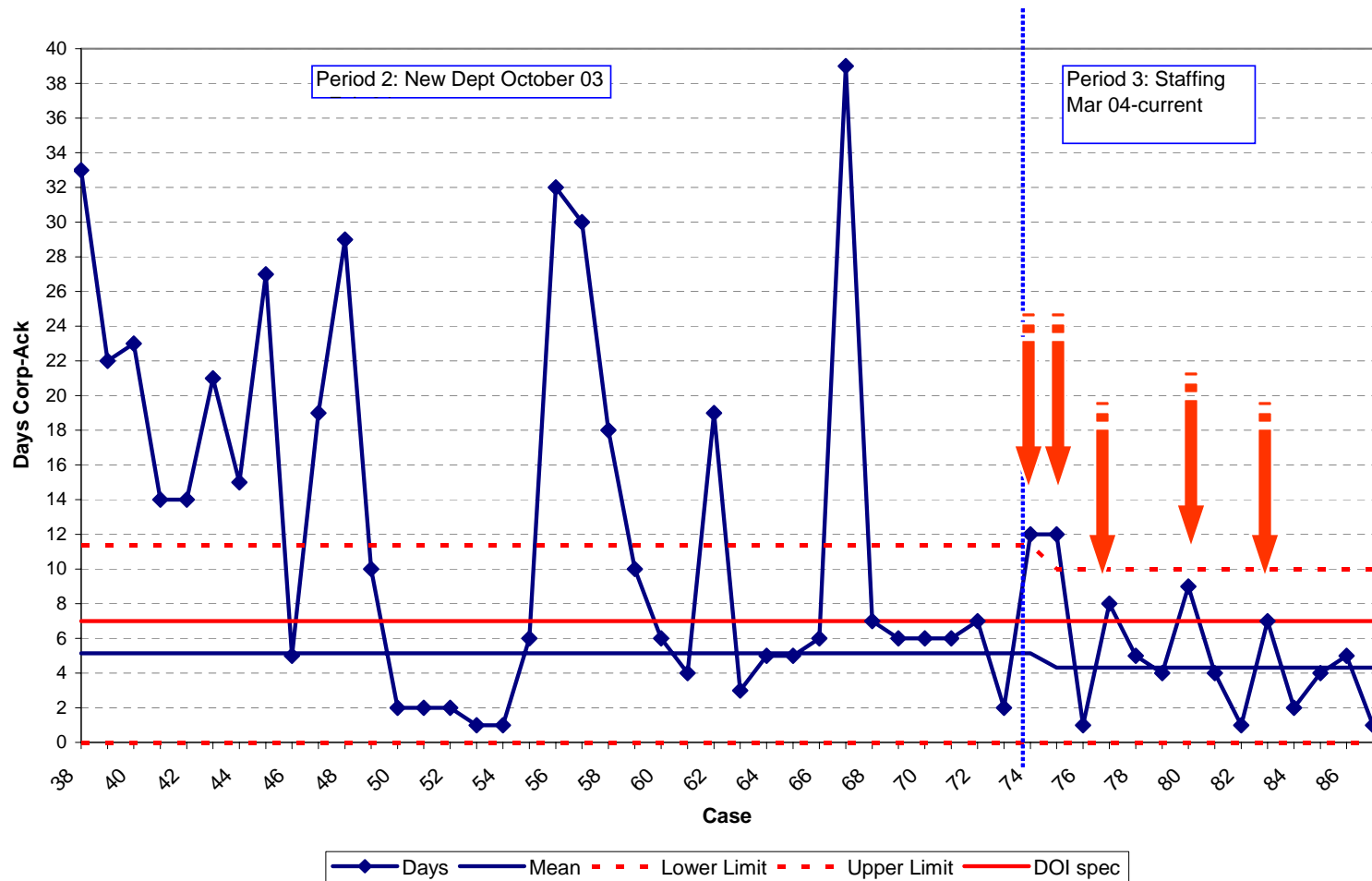
How were we doing?

Time from Corp Intake to Ack Ltr



How were we doing?

Post-Baseline Corp Intake to Ack Ltr



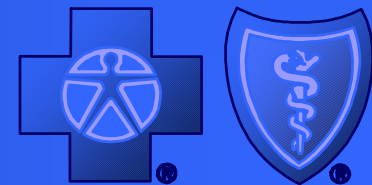
The “Quick” Team - QICC

Quality Improvement in Complaints and Care-alerts



Next steps:

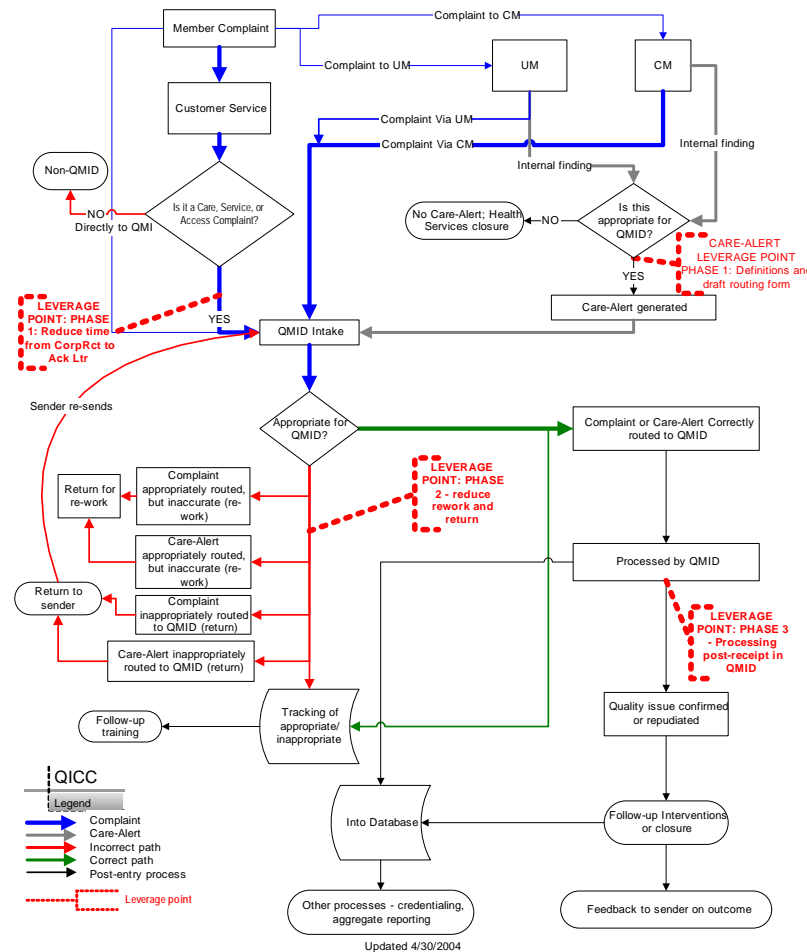
- The QICC team developed a conceptual model showing where our leverage points were.



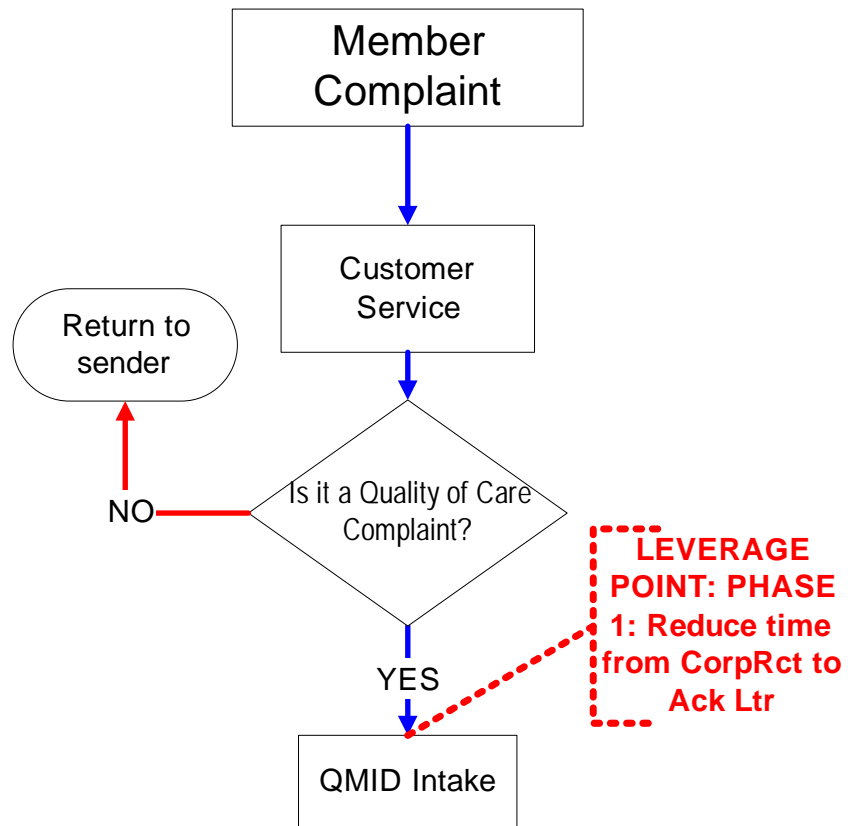
Conceptual Model

Quality Improvement in Complaints and Care-Alerts ("Quick") Team

AIM: "To improve the timeliness and accuracy of the processing of Complaints and Care-Alerts."



Conceptual Model



Setting a Goal with an Aim Statement:

Q/ICC: Quality Improvement of Complaints and Care-Alerts

Mission: “Improving the timeliness and accuracy of the processing of Complaints and Care-Alerts.

Aim:

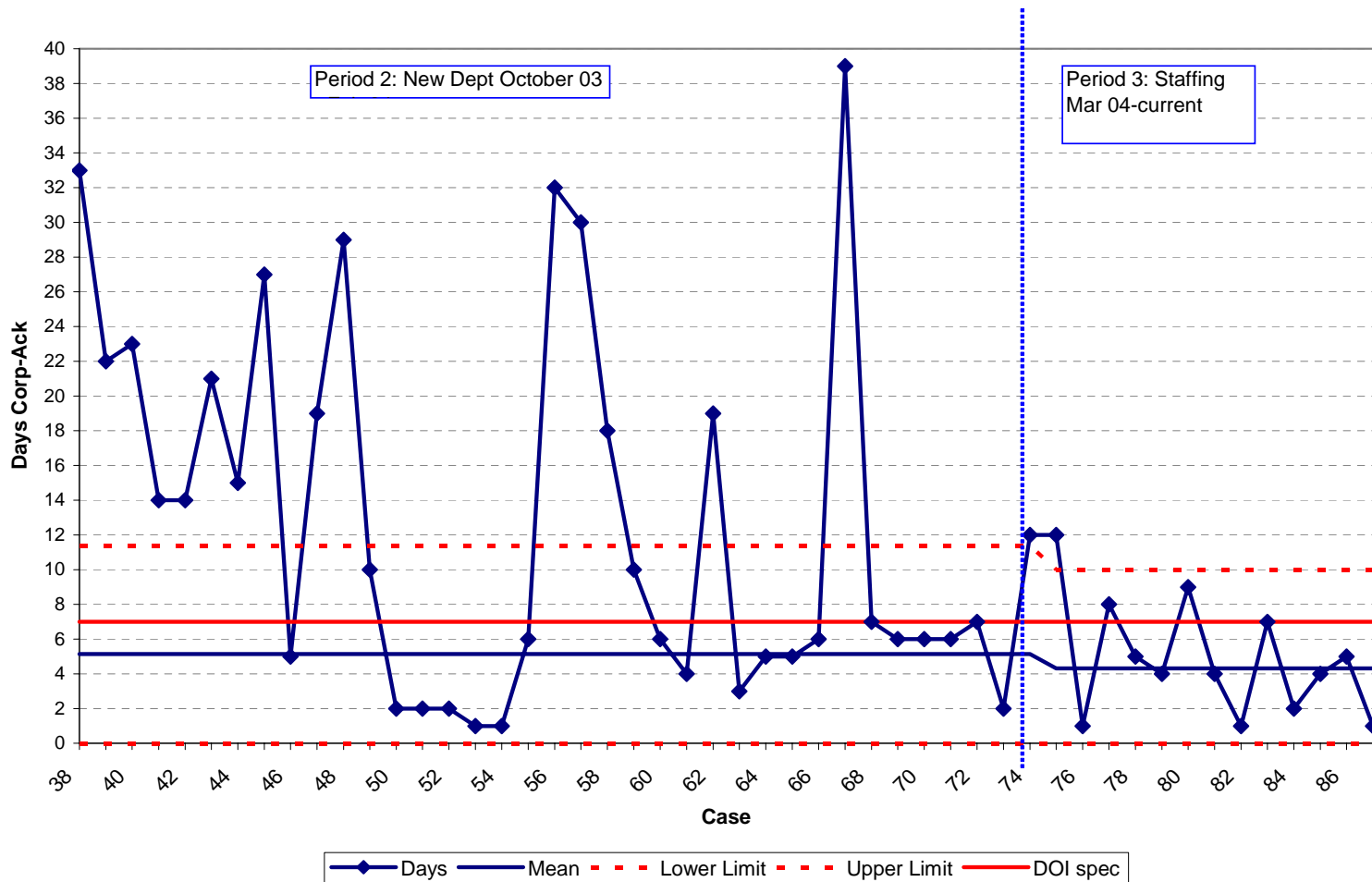
The purpose of Phase I of this project is to achieve by May 31, 2004 the following improvements:

1. Improvement in Complaint Processing timeliness will be demonstrated by achieving zero-defects (i.e., no cases greater than 7 calendar days from corporate receipt to acknowledgement letter) and reducing the mean time from corporate receipt to acknowledgement letter to 3 calendar days.



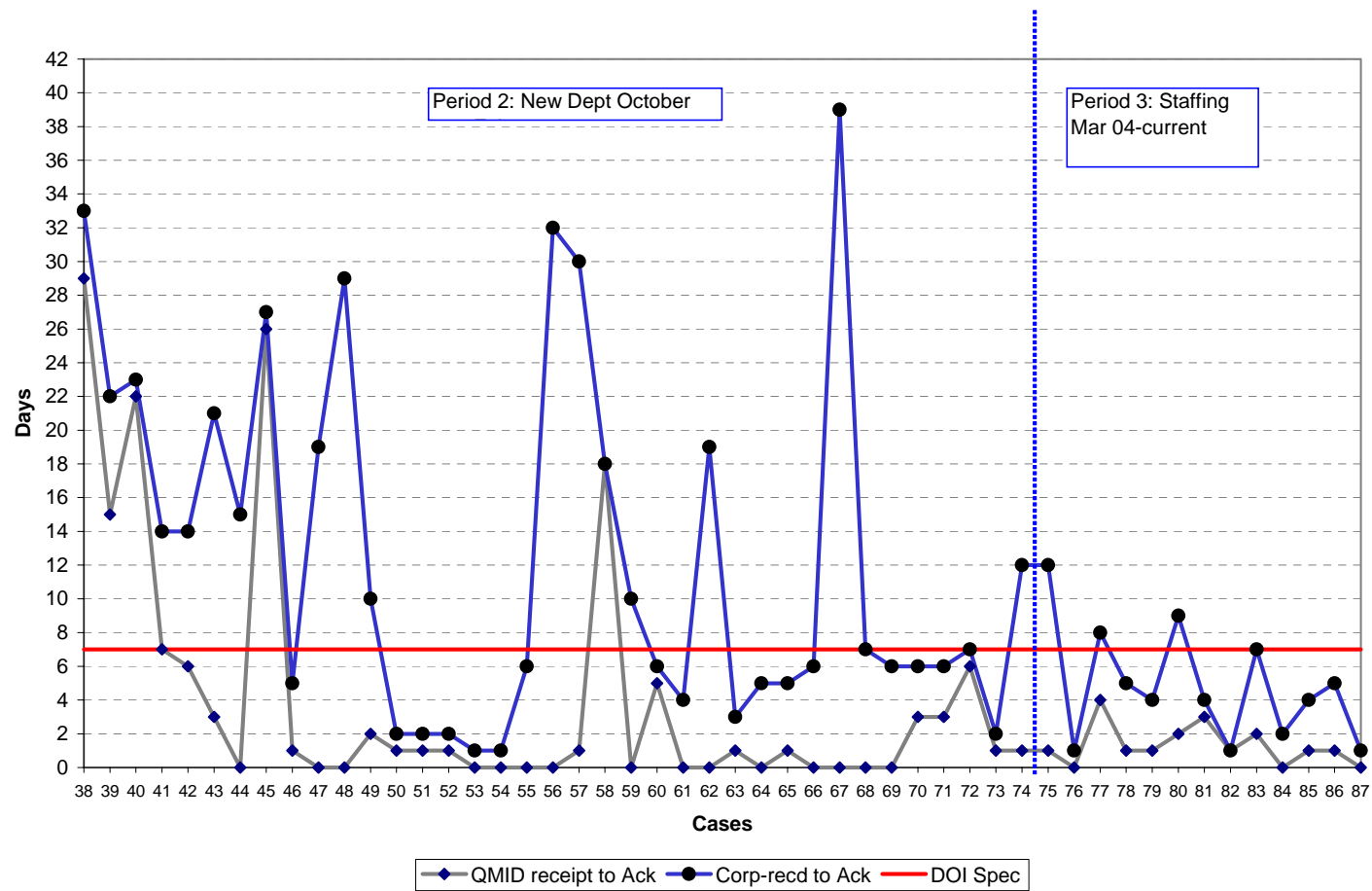
“We” had defects....right?

Post-Baseline Corp Intake to Ack Ltr



The real opportunity!

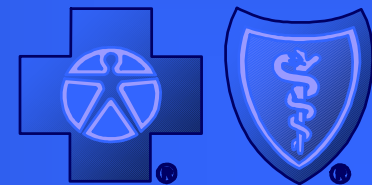
Total Time (Corp->Ack) and QMID Time (Q-recd->ack)



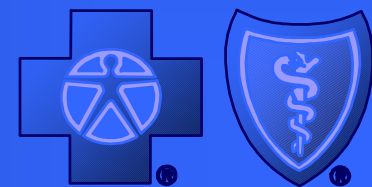
Aha! Moment:



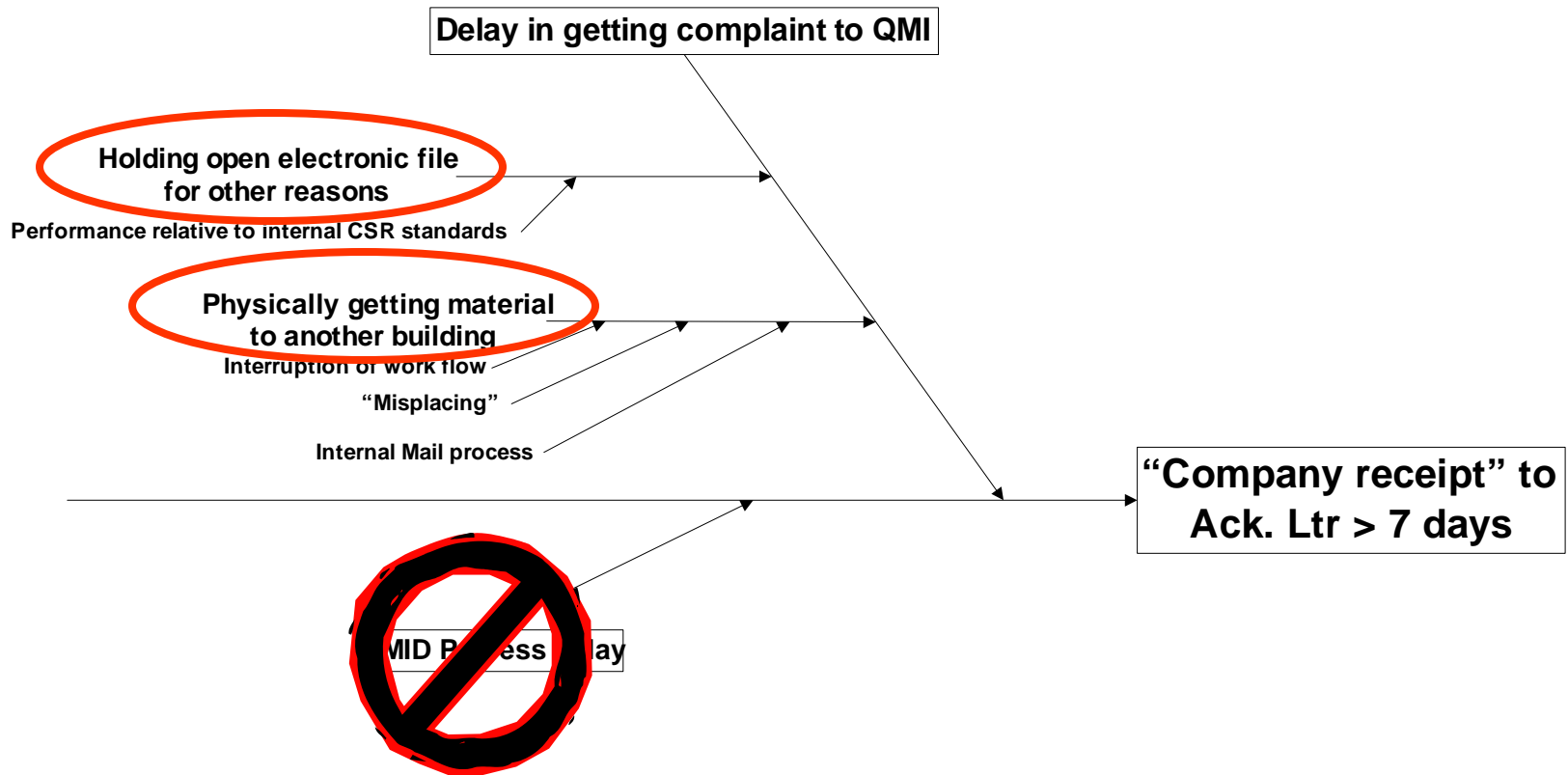
- In all cases where “we” were out of compliance, the source of the delay was outside our department.



Opportunity: Zero defects!

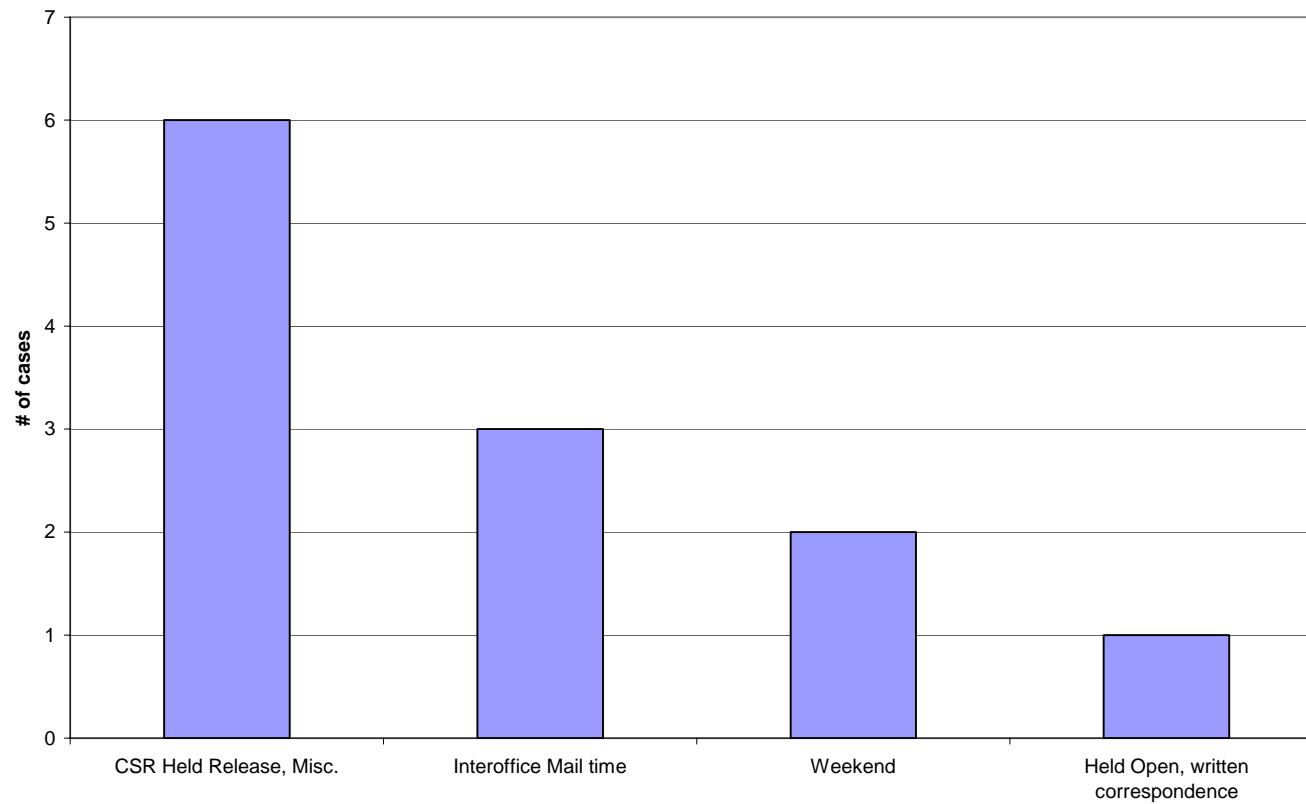


Cause and Effect



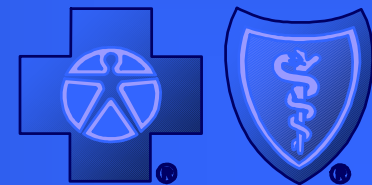
Analysis

Pareto Analysis: What causes delay in getting to QMID?



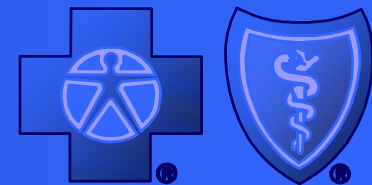
PDSA – “Plan”

- Met with all key department personnel from the CSR on the line to the Director able to authorize change
- Reviewed the data
- Developed a plan



PDSA – “Plan”

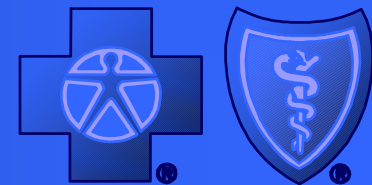
- Switch “ownership” of the electronic file to our department when a quality of care complaint involved. (Reduce CSR fear of not meeting timeliness.)
- Create a special e-mailbox so complaints could be routed electronically.



PDSA – “Do”

- At the eleventh hour...

**DO NOT
ENTER**



The Woman Who Wasn't There

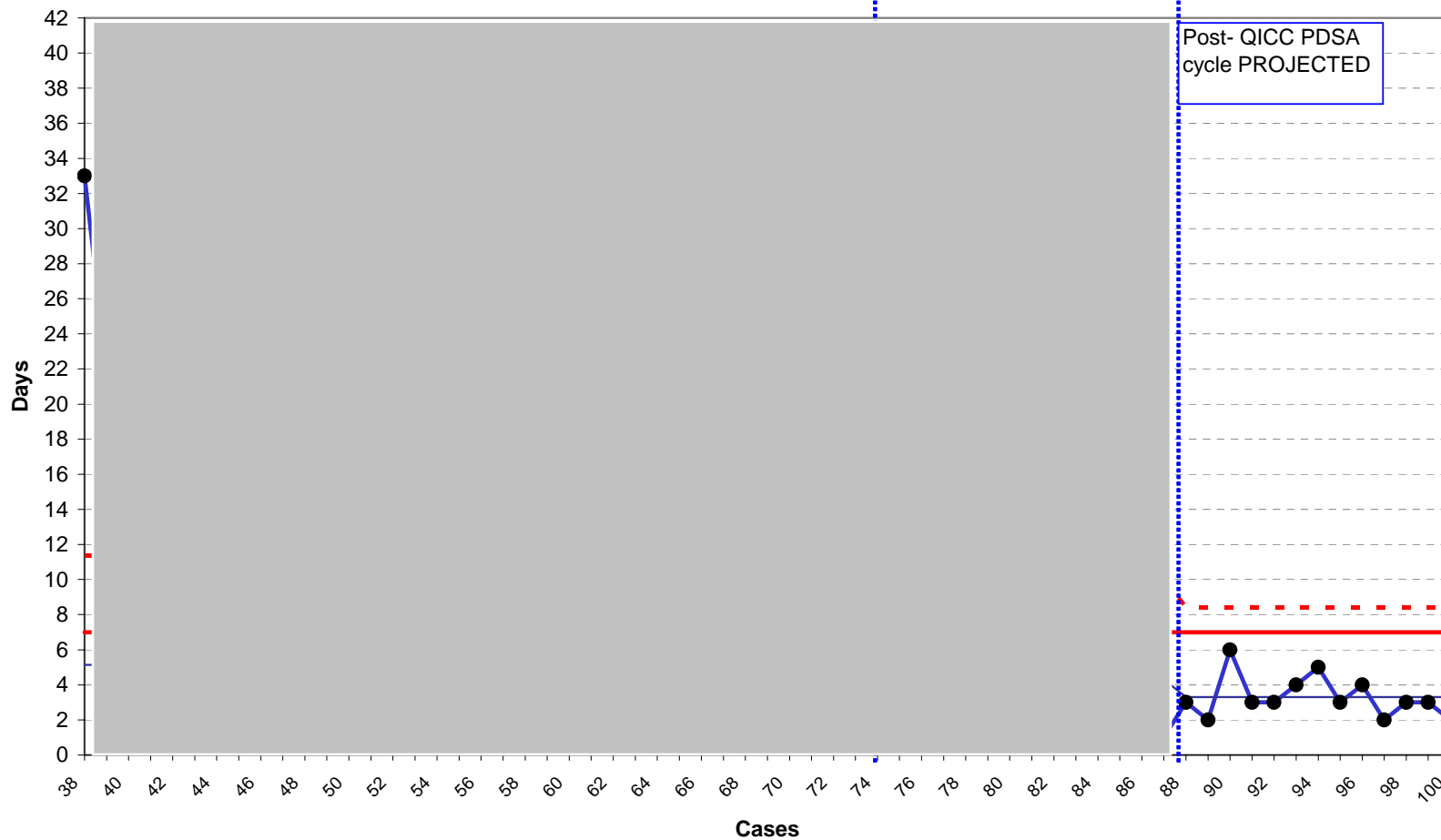


- Despite involving “all” key players, ONE key player made a difference – the woman who wasn't there!
- New considerations
- Re-thought the plan
- Actually *better* option revealed – our own “queue”



Today – waiting follow-up data...

Total Time (Corp->Ack) and QMID Time (Q-recd->ack)



● Corp-recd to Ack — DOI Spec - - - UCL — Avg.

Some Lessons

- Assumptions about the source of delay were false; measurement revealed deeper truth.
- Involving those close to the process was critical to understanding cause and effect.
- Important to double-check your definitions: working days vs. calendar days.
- Even when you think you have “All” the key people, double-check that you have “All” the key people.



Welcome to Visit Us in NM

We Are Here

