INDIVIDUAL ADVOCACY

IMPROVING CLIENT DATA MANAGEMENT & MEDICIAD CLAIM EFFICIENCY

New Access Database Overview

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EXECUTIVE SUMMARY

A centralized database that unifies client records, case manager activity, and Medicaid billing data—reducing errors, improving access to information, and protecting over $100K/month in revenue.

What the System Delivers:

- One source of truth for 400+ clients
- Immediate visibility into authorizations & unit usage
- Faster, more accurate Medicaid billing
- TCM-friendly workflows and customized reporting
- Improved compliance and service continuity

PROBLEM

Fragmented data caused recurring billing delays, incomplete client records, and preventable revenue loss.

Key Challenges:

- Average of $5K+ monthly at risk due to various claim issues
- 400+ client records scattered or incomplete
- No centralized billing hub for claim status or authorization info
- Unknown authorization lapses risking service interruptions
- Manual processes created delays and inconsistent data accuracy

SOLUTION
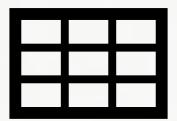
A unified Client & Medicaid Billing Database that streamlines billing, improves data accuracy, and supports day-to-day TCM operations.

Key Challenges:

- Centralized data access for clients, TCMs, and units
- Faster claim tracking across all months
- Automated authorization visibility to prevent lapses
- Accurate monthly billing + cross-checks
- Instant reports for management and case managers

DATABASE ARCHITECTURE

Designed for stability, separation of duties, and future scalability.

Tables

Client Master Table

Monthly Billing Tables

Case Manager

Client Information

UHC Clients

Forms
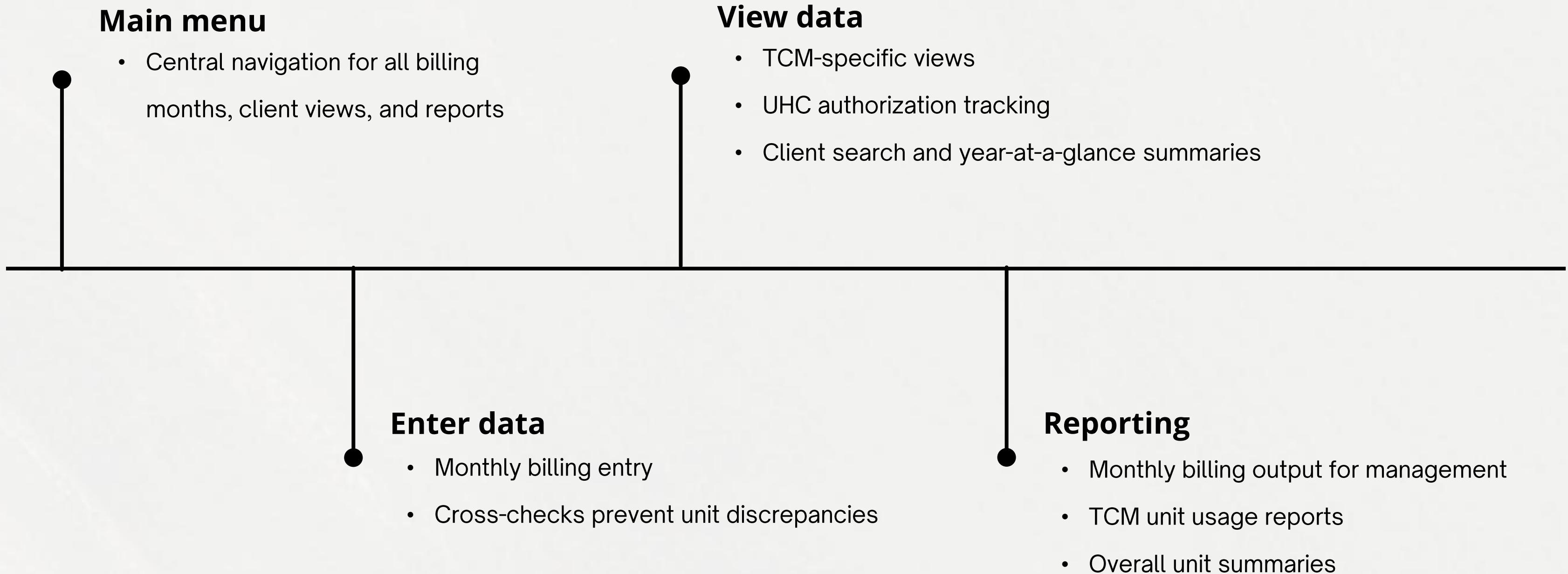
Billing Entry

Client Lookup

TCM Tracking

Client/TCM Editing

Reports

TCM Client List & Units

Overall Unit Usage

Authorizations

Ad Hoc Views

WORKFLOW OVERVIEW

Main menu
- Central navigation for all billing months, client views, and reports

View data
- TCM-specific views
- UHC authorization tracking
- Client search and year-at-a-glance summaries

Enter data
- Monthly billing entry
- Cross-checks prevent unit discrepancies

Reporting
- Monthly billing output for management
- TCM unit usage reports
- Overall unit summaries

MONTHLY BILLING FORM

Ensures accurate billing by combining unit entry, claim information, and built-in validation.

Key Features:
- Top form: TCM unit entry + automatic total calculation
- Bottom form: Monthly billing details, claim numbers, and notes
- Cross-check logic ensures unit totals match
- Conditional formatting: Unpaid claims flagged in red
- Search & filter for multiple clients

Why it Matters:
- Reduces manual errors
- Supports real-time claim status tracking
- Improves month-end billing accuracy

CLIENT & TCM VIEWS

Client View:

- Core client details for billing
- TCM dropdown linked to Case Managers table
- Note section for Care Coordinator/Guardian information

TCM View:

- Incorporate staff photos
- Monthly 'Unit Summary' for Medicaid and Private Pay
- 'TCM Login': If security levels are needed for access

REPORTING

Overall Units Used

MCO	CLIENT	MED ID	Init. Units	PA	Remain	Used	Jan	Feb	Mar
HB			240	0	154	86	62	11	13
HB			240	0	195	45	25	11	9
HB			240	0	167	73	30	15	28
HB			240	0	205	35	16	9	10
HB			240	0	128	112	55	36	21
HB			240	0	206	34	11	13	10

Overall Units Used - TCM

MCO	CLIENT	MED ID	IU	PA	Remain	Used	Jan	Feb	Mar	Apr
HB			240	0	128	112	55	36	21	0
Units from other TCMs							*0*	*0*	*0*	*0*
HB			240	0	198	42	18	18	6	0
Units from other TCMs							*0*	*0*	*0*	*0*
HB			240	0	212	28	12	7	9	0
Units from other TCMs							*0*	*0*	*0*	*0*
S			240	0	193	47	13	19	15	0

Overall Units Report:

- Management-level summary
- Displays units granted (PA) and units used
- Supports service continuity and audit requirements

TCM Units Report:
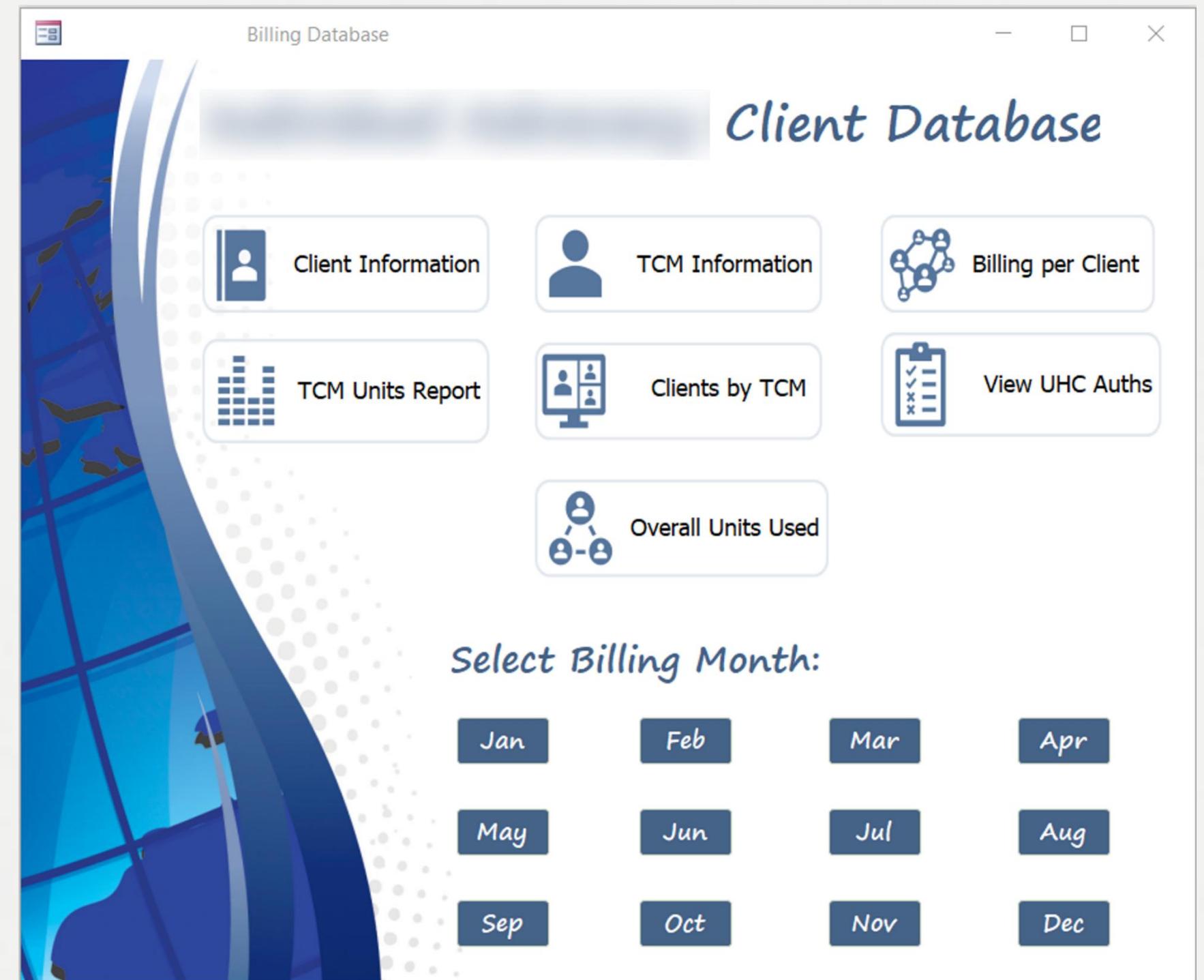
- Filtered by TCM initials
- Shows unit usage across all clients
- Includes secondary TCMs if applicable

IMPACT AND VALUE

The new database improves accuracy, transparency, and revenue protection across the organization.

Measurable Benefits:

- Protects $5K+ monthly revenue previously at risk due to denials
- Eliminates manual tracking of units and claim status
- Improves compliance with authorization requirements
- Creates an audit-ready trail for all billing data
- Scales for future forms, reports, or additional services

TECHNICAL SIDE OF THINGS

```
1    SELECT
2        MasterClientList.[Client Name],
3        MasterClientList.[Medicaid#],
4        MasterClientList.[MCO],
5        MasterClientList.[DOB],
6        "January" AS [Month],
7        Jan_Billing.[UNITS],
8        Jan_Billing.[OTCM units],
9        Jan_Billing.[Total Units],
10       Jan_Billing.[$Bill],
11       Jan_Billing.[Balance],
12       Jan_Billing.[Paid],
13       Jan_Billing.[Note]
14   FROM
15       MasterClientList
16   LEFT JOIN
17       Jan_Billing ON MasterClientList.[Medicaid#] = Jan_Billing.[MED ID]
18
19   UNION ALL
```

How is the Information Combined?

- Select information from the 'Clients' and each monthly billing table is combined into one using SQL (Structured Query Language) . Queries were created for each billing month
- Information from the two tables are joined on the client's Medicaid number

Other Technical Tid-Bits:

- The Database has been split into a 'Front-End' and a 'Back-End;
  - **Front-End** – contains the forms and the reports
  - **Back-End** – contains the tables and queries and is not accessible to unauthorized individuals maintain the database's integrity
- Specialized reports can be created as needed
- All data tables can be exported into either CSV or Excel files and used for visualizations
- Update Queries are incorporated to ensure that any new clients appears in the appropriate billing month's data entry table(s) and reports

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Thank You!

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