

Helping a health plan make accessibility a reality

While most organizations try to make federally mandated accommodations for people with disabilities, it is easy to drift out of compliance over time, or to not be aware of the practical shortcomings of your day-to-day operation.

This Illinois Medicaid managed care organization had been reporting near full accessibility of its provider network for years, when a state plan audit determined that its compliance assessment tool was inadequate. It turned out that the provider accessibility data on its website and in its provider directories was inaccurate, identifying network providers as “accessible” when they were not. Members were at constant risk of not being able to access to materials, information, or testing equipment, or of making appointments only to discover upon arrival that they may not be able to enter the. Disability advocates had begun to focus on this kind of inaccurate accessibility data put out by plans in the state.

Facing impaired credibility with its members, violations of its state contract, and potential legal action, the plan came close to adopting a complex solution recommended by the state auditor, which it assumed represented the only solution that would be found acceptable to regulators. But this tool was highly cumbersome, involving significant implementation challenges and entailing onerous reporting requirements for the provider network.

This type of situation is potentially faced by many plans and health systems. Practices put in place several years ago may no longer reflect today’s standards of inclusion and accommodation. Recent updates to Medicaid regulations, for example, include a push to more accurately report provider network information, including compliance, on their websites and provider directories.

The SPW approach

SPW sat down with the plan to understand the scope of their challenges in tracking and reporting accessibility. The organization was still basing its accessibility data on a paper form that providers were asked to complete. But our discussions and process review revealed an underlying “compliance culture” issue. Departments knew that ADA compliance was important, but didn’t have the processes in place to accurately assess it, or a concrete grasp of how in practice lapses affected the plan’s members. Provider and staff training materials did not include real-world examples and situations, and did not explain how to move effectively to make needed changes; and materials for members did little to explain what their rights under the Americans with Disabilities Act meant when accessing medical care.

Our review of the plan’s compliance, marketing, and medical management provided the starting point for to developing a comprehensive project plan that would instill a culture of ADA compliance throughout the organization.

We created a blueprint for an updated compliance assessment tool. Synthesizing current best practices, we revised the plan’s provider training materials and created a customized eight-week curriculum with new content

for trainings, webinars and staff newsletters. We built member-facing materials that sketched out the physical, programmatic, and informational types of ADA access, so that patients could understand how to make an appointment that would work for them, and what to do if they got there and the provider was not accessible. Coupled with the improved internal processes, these new materials helped ensure that members received accommodations when requested and that the request process would be handled smoothly.

From awareness to experience

SPW went the extra mile to help the plan bridge the gap from theoretical “disability awareness” into practical “disability experience.” Working closely with the plan and holding weekly meetings with the network team, we helped them through a makeover of accessibility-related operations at every level. This included establishing a framework for hiring staff that would perform provider site audits to ensure accurate reporting of the level of ADA access and mapping out new policies and procedure reviews with all member-facing departments to ensure the plan was prepared when members called asking with access requests.

Beyond the plan’s provider engagement and data tracking, we also worked with member-facing teams – care coordinators and the call center – to strengthen their processes for ensuring that members get materials in accessible formats. SPW also communicated with the plan's Compliance, Quality, Legal, Grievance, and Appeals departments to explain why ADA compliance was important and how it fit into their areas of operation.

The plan now had new language for the member and provider handbooks clearly outlining its stance on ADA compliance; invigorated hiring and onboarding procedures that would make compliance not a goal but a lived reality; and an updated assessment tool that, combined with regular procedure reviews, would keep the plan in stable compliance with the state.

We also strategized with the plan regarding its very-low-income providers, who often struggled to comply. In an innovative piece of problem-solving, we helped the plan create a barrier-removal fund to assist these providers in attaining accessibility.

An unexpected win

In the end, the ADA provider compliance tool that we outlined for this client was not only accepted by them, but was actually embraced by the state’s Medicaid agency, which pushed this tool for all plans to use across the state. Had this unexpected action not taken place, each of the state’s health plans would still be using their own distinct tool, perpetuating the burden on plans and providers, and prolonging the confusion regarding what constitutes ADA compliance and how it can be assessed.

The result was not only a better service to a vulnerable population, and avoidance of legal action and penalties for our client, but a statewide public policy improvement that was a win for every health plan in Illinois.

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