

For Reporting Period: January 1, 2016 through June 30, 2016

I. General Information:

Lead agency name: Office of Administrative Hearings

Partner agencies: Health Care Authority (HCA), Department of Social and Health Services (DSHS)

Improvement project title: HCS Scheduling Improvement Project

Date improvement project was initiated: 6/1/2014

Project type: New Project

Project is directly connected to:

□ Results Washington performance

maacura

measure

If applicable, specify the alignment:

2.1: Increase percentage of projects with measured improvements, as reported in strategic lean project reports, in cost and/or, quality, safety, time, customer satisfaction, employee satisfaction from 48% to 100%

by December 31, 2015

□ Agency Strategic Plan
 □ 2.1 Use Lean problem-solving to improve service,

reduce delays and lower costs.

3.5 Strengthen partnerships with referring agencies to enhance appeal processes to better serve the

public.

3.5a Continuously engage referring agencies to identify opportunities for improvement, improve

processes, and sustain best practices.

Report reviewed and approved by: Lorraine Lee, Chief Administrative Law Judge

II. Project Summary:

The Office of Administrative Hearings (OAH) improved the time required to schedule a hearing for the Home and Community Services cases, resulting in a reduction in the time required to schedule for all of our cases. This increases access to justice for the people in Washington.

Dockets are used to group cases and schedule them on dates with dedicated judges and hearing representatives. At the beginning of the project, it took up to 165 days to schedule a case. Currently four (out of six) dockets are now meeting the goal of 45 days or less to schedule the hearing. The two dockets who have not yet met the 45 day goal also saw improvements and reduced the scheduling time down to 72 days and 66 days. We are continuing the improvement effort to reduce those down to 45 days as well. This takes a coordinated effort between OAH, DSHS and HCS because of the limited amount of hearing representatives.

In addition to the reduction in scheduling time, OAH also reduced the time it was taking to close cases. This means that the people in Washington have a resolution to their appeal faster. The overall time to close a social services care hours cases reduced from 145 days down to 110 days. The overall time to close a financial eligibility case reduced from 123 days down to 87 days. The goal is to close cases in 90 days.



III. Project Details:

Identify the problem:

Home and Community Service (HCS) cases were taking up to 165 days from receipt of the hearing request to the first scheduled hearing. HCS cases involve a person's financial eligibility for receiving long term care or how many hours of care they can receive. HCS cases also involve disqualification of individual care providers and individual provider overpayments. These cases generally involve elderly or disabled residents of Washington. The agreements with the Health Care Authority (HCA) and the Department of Social and Health Services (DSHS) state that OAH will schedule the cases to be held within 45 days of receipt of hearing request.

Problem statement:

Currently, it takes up to 165 days to schedule HCS cases compared to our target of 45 days, which we want to reach by 10/1/2016.

Improvement description:

Both support staff and administrative law judges from OAH engaged in a root cause analysis and brainstormed ways to decrease the time it was taking to schedule cases. Significant data was gathered to determine how many hearings were resolved before the case reached the scheduled hearing date. This allowed more accurate projections for how many cases could be scheduled each day knowing that a portion of them would be settled or withdrawn. The cases were divided and assigned using a new method that allowed additional judges from OAH and hearing representatives from DSHS to handle more cases. A backup judge was established which enabled teamwork between judges to cover hearings if more of them went to hearing than were expected. This new system allowed more cases to be scheduled with existing resources.

There was intensive effort focused on clear communication, gathering feedback about process changes, and vigilantly improving processes as the backlog of cases was reduced. This took cooperation between agencies and hours of dedication to constantly apply the "plan, do, check, adjust" method and improve the system while maintaining every person's right to receive due process and high quality decisions.

This system has allowed a large backlog of cases to be heard and, in most instances, OAH is now meeting the scheduling requirements.

Customer involvement:

There was extensive work done internally involving both judges and support staff in gathering information, documenting the current state, and brainstorming possible solutions. Many conversations were held with both HCA and DSHS asking for their ideas and support in improving this process. OAH management attended multiple meetings at DSHS and HCA. Both DSHS and HCA provided regular feedback about process changes which allowed for constant improvements.



IV. Project Details:

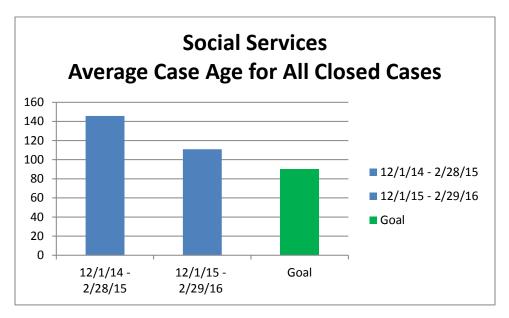
Improved process as measured by: (Click those that apply)	Specific results achieved: (Complete the narrative boxes below)	Total Impact: (Actuals; Current Reporting Period)	Results status:
⊠ Time	Scheduling Time Reduced Decreased the time required to schedule a hearing from 165 days to 45 days or less for four of our six dockets. (This is for cases involving 4 out of 6 hearing representatives' scheduled cases on three separate dockets).	120 day reduction from 9/2014 to 6/2016	Final
	Overall Time to Resolve a Case Reduced Decreased the average time to close a case from 145 days to 110 days for social services care hours cases. Decreased the average time to close a case from 123 days to 87 days for financial eligibility cases.	35 day reduction from 12/2015 to 3/2016 36 day reduction from 12/2015 to 3/2016	

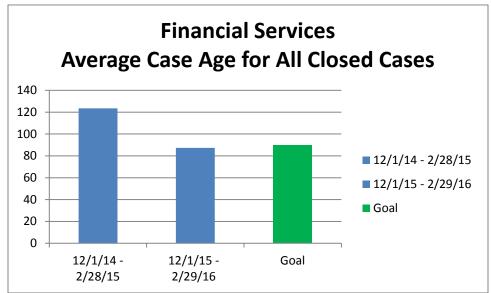
V. Contact information:

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For Reporting Period: January 1, 2016 through June 30, 2016

I. General Information:

Lead agency name: Office of Administrative Hearings

Partner agencies: Health Care Authority (HCA), Department of Social and Health Services (DSHS),

Employment Security Department (ESD).

Improvement project title: Single Case Management System - PRISM

Date improvement project was initiated: 4/24/2013

Project type: Previously reported project

Project is directly connected to: If applicable, specify the alignment:

□ Results Washington performance

measure

2.1 Increase percentage of projects with measured

improvements in cost and/or, quality, safety, time, customer satisfaction, employee satisfaction as reported in strategic lean project reports from 48% to

100% by December 31, 2015

Goal 5: Resource Stewardship

☐ Agency Strategic Plan ☐ Goal 2 – Promote efficiencies and increase customer

value.

2.3a Use technology and Lean methods to redesign or improve business processes to meet customer needs.

Report reviewed and approved by: Lorraine Lee, Chief Administrative Law Judge

II. Project Summary:

The Office of Administrative Hearings (OAH) improved the management of appeals, resulting in reduced risk, increased efficiency and a savings of \$111,000 annually.

OAH conducts appeal hearings for many state agencies. OAH has been in the process of migrating off of old technology by developing a single case management system, PRISM. We gained efficiencies in the areas of data integrity, reporting, case billing, and document management. The system also allows for faster processes especially when scheduling and managing cases. This allows faster access to justice for the people of Washington.

The project began when OAH was struggling to meet our standard of closing cases within 90 days for Health Care Authority (HCA) appeals. This delay directly impacted Washingtonians who needed to use the appeal process to resolve their health care benefit issues.

PRISM, the new case management system, was built in-house to replace an outdated system that was unstable and very old technology. OAH successfully replaced the old system used for the Health Care Authority cases. Scheduling improved reducing cases that were over 200 days old down to an average 50 days. The process for receiving, setting up, scheduling a case, and generating a Notice of Hearing went from requiring 6-7 minutes per case in the old system down to 2:55 minutes in PRISM.



OAH continued to build and enhance PRISM. Within a three year period, OAH migrated all of the caseloads into this new system and retired three separate case management systems. This reduced our severe risk of losing data from unstable systems. OAH will also save \$111,000 annually in subscription fees which saves tax payer dollars.

PRISM allows all caseloads to set up and process cases faster. PRISM allows us to gather and track data more accurately which enables us to be more efficient and transparent. With centralized data we are able to shift resources between caseloads, regardless of the location, which helps us effectively use our existing resources to cover new or expanding caseloads. PRISM also allowed us to create an electronic case file rather than printing paper files.

PRISM also positions OAH to be able to share data electronically with the public in the future.

III. Project Details:

Identify the problem:

OAH had multiple case management systems which created a lack of uniformity and standard practices agency-wide. The old systems were unstable and there was a high risk of losing data.

Problem statement:

Currently, we have multiple legacy case management systems compared to our target of one enterprise system, which we want to reach by 6/30/2016.

Improvement description:

OAH built a new case management system using Agile Development methodology and Lean tools including context mapping, value stream mapping, and scrums. We used subject matter experts (SMEs) from each office to provide feedback, user requirements, and articulate the desired future state. The Information Technology team (IT) engaged with the SMEs and delivered small incremental code bases for users to experience, test and provide feedback. It was an extremely interactive process where IT was able to make corrections and match the needs of those who would actually be using the system.

Caseloads were integrated into PRISM incrementally. Lessons learned were evaluated and applied from each migration to improve the integration of the next caseload. It was an environment of continual feedback and continuous improvement.

Workflows, templates, and dashboards made the system accessible, user friendly, and efficient. There is now an electronic central repository for hearing data. The system accurately captures and reports data that enables effective management of daily activities and facilitates meeting deadlines. Processes are able to be performed more efficiently in the new system which results in cases being heard and concluded much faster.



Customer involvement:

OAH met with HCS, DSHS, and ESD gathering information from their perspective as a customer identifying what they didn't like and what they needed from OAH. OAH also held demonstrations for state agencies to look at PRISM. We had collaborative engagements with the technical teams at other state agencies and we shared with them the PRISM code base.

In addition, each of the five OAH offices participated in the development, testing and migration of the current cases into PRISM. The end users of the system were involved in delivering continual feedback as the system was developed.

IV. Project Details:

Improved	Specific results achieved:	Total	Results
process as measured by: (Click those that apply)	(Complete the narrative boxes below)	Impact: (dollars, time, transparency)	status:
⊠ Cost	Decreased cost by eliminating subscription fees and managed server hosting fees from \$111,000 annually to \$0.	Decreased from \$111,000 to \$0	Final

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VI. Optional Visuals:

