Professional Portfolio:
HeartWorkToday.com

Laura E. Williams, MS, CHES

Healthcare Finance | Health Education

Healthcare Finance Selected Deliverables

Independence Blue Cross

Providing B2B services to brokers of health insurance and companies through CRM systems interrogation and policy compliance

Servicing Small Group 50<

Servicing Large Group 51>

Servicing Fully-Insured and Self-Funded groups

University of Pennsylvania Biology Department Eukaryotic, Pathogen, Host & Vector Genomics (VEuPathDB) resource

Reporting of 12 monthly National Institutes of Health documentation submissions for the Biomedical Research Cener (BRC) financial contract

Reporting the estimated cost option utilization for each quantity option base period and term option period with quantity options

75% Burn Notification reporting of contract funding

Hospital of the University of Pennsylvania

Compliance adherence financial credits and debits for 20+ medical practices

Safety auditing of 2,500 peri-op medical records

Qualitative Data Collection Opportunities in Peri-Op Patient Experience Calls (observational summary on the next page)

Opportunities for Early Action by Clinical Practices and their Clinical Administrators to Address Patients' Topics of Concern Using Qualitative Data Collection During Peri-Op Patient Experience Calls

Patient calls to the Peri-Op Center present opportunities to obtain qualitative data on patients' topics of concern from clinical practices and their clinical administrators. The categorical frequency of patients' concerns during peri-op calls is unknown, unrecorded, and not collected. Omitting the collection of patients' concerns during peri-op calls is due to the conditions and constrains of the peri-op communications workflow. Opportunities to record and collect patients' concerns during peri-op calls are possible with changes to the peri-op communications workflow. Multi-departmental changes in the areas of clinical practice awareness, clinical administration training, and the constraints of the peri-op communications workflow must be directed at taking early action to address patients' concerns.

Patient's frequently asked questions (FAQ) are notable topics of concern (TOC):

personal support education communications medical scheduling finance logistics

Personal, idiosyncratic organizing	Vehicle or parking information
Personal physical needs	Campus directions
Personal emotional needs	Canceled or rescheduled procedure
Escorting	Billing
Visitor passes	Insurance
Additional visitors	No COVID test order
Overnight visitors	No COVID test scheduled
Correction of misinformation	Outdated COVID test results
Lack of information about preparation for a procedure	Receiving a COVID test
Frequency and mode of communication from different entities within the healthcare system	COVID test protocol and requirements
Lack of responsiveness from or connection to a clinical practice	Idiosyncratic disclosures, misinformation, and lack of information about COVID testing

Patients' Topics of Concern on which Clinical Practices Can Take Early Action:

Lack of information about preparation for a procedure	Outdated COVID test results
Correction of misinformation	Receiving a COVID test
No COVID test order	COVID test protocol and requirements
No COVID test scheduled	Idiosyncratic disclosures, misinformation, and lack of information about COVID testing

Patients' Topics of Concern on which Clinical Practices and their Clinical Administrators Can Jointly Take Early Action:

Personal, idiosyncratic organizing	Canceled or rescheduled procedure
Personal physical needs	Lack of responsiveness from or connection to a clinical practice
Personal emotional needs	Frequency and mode of communication from different entities within the healthcare system
Escorting	Campus directions
Visitor passes	Vehicle or parking information
Additional visitors	Insurance
Overnight visitors	Billing

Omitting the collection of patients' concerns during peri-op calls due to the conditions and constrains of the peri-op communications workflow is not an approach that is patient-centered (Starfield, B. (2011)) within surgical procedure preparations. Multi-departmental changes in the areas of clinical practice awareness, clinical administration training, and the constraints of the peri-op communications workflow must be directed at taking early action to address patients' concerns.

Starfield, B. (2011). Is Patient-Centered Care the Same as Person-Focused Care?. The Permanente Journal, 15(2), 63-69. doi: 10.7812/tpp/10-148