

# Medicare Enrollment

**Client Type:**

Blue Cross Blue Shield Plan

**Project Scope:**

Process Improvement

**Duration:**

6 Months

**Team Size:**

1 Full-Time Employee

 **Problem**

A Blue Cross Blue Shield plan contacted Jacobson with a struggling Medicare enrollment department. They were not meeting CMS requirements and were in need of updated and improved policies and procedures, as well as staff development.

 **Solution**

**In just over six months, the consultant revised 63 standard operating procedures for the department.** She also educated the team on Medicare regulations and CMS regulatory guidelines and helped raise overall Medicare knowledge levels throughout the department. The consultant developed a productivity tracking mechanism to assist in calculating and monitoring the pay-for-performance incentive program and conducted staff evaluations. To ensure the department meets CMS regulatory requirements, the consultant conducted refresher trainings with staff and created a reference document outlining CMS processing expectations as an ongoing resource.

 **Response**

Jacobson determined the client would benefit from a full-time, project focused Medicare enrollment expert to guide the enrollment department through the improvement process.

