

CHANGE IMPACT STATEMENT

Hospital Site: St Vincent's Private Hospital

Department: Billings and Revenue Teams

1. Brief Description of Change Proposal

SVHA will be seeking to implement the use of Automated billing BOTS in the billing space in an effort to increase speed and accuracy in the delivery of invoices and also debt recovery. This will enable improvements in revenue reimbursements, impacting cash flow for hospitals and improve debt recovery. The process is a major step forward in the want of SVHA to have centralised operations of Billing and HIM services agnostic of specific hospitals.

The advancement of Robotic Process Automation over the last several years has allowed for processes such as Health Fund Billing to be automated with a moderate associated project risk. This project seeks to automate the health fund billing function and by doing so , increase accuracy of billing and faster debt recovery. This will allow for a more cost efficient billing process that will assist St Vincent's in its financial recovery.

The solution will impact the Billing and Billing Manager roles, a number of which will no longer be required. The remaining roles will be for the purposes of processing billing and debt recovery that sits outside the capability of the BOTS. The responsibilities within these roles will see the development of teams aligned to health fund contract rather than specific hospitals. This will provide greater consistency of work, succession planning and specialist knowledge within teams

SVHA acknowledges that this decision may be disappointing to staff and we are committed to working with all affected individuals and groups to ensure a seamless transition graduated over time from current process to full implementation. St Vincent's will provide regular communication updates during the crucial period and provide the necessary support to staff.

2. Current Situation

At present the work completed in these processes is down to hospital based teams that are predominately housed off site. The Billing function has become extremely federated per hospital in its range of functions often resulting in staff taking on roles and responsibilities outside their position description. Teams in some instances have become confused as to whom ultimately manages them and can receive conflicting messages as to process and requirements of billing and their work priorities.

3. Proposed Situation

The implementation of Billing BOTS will increase efficiency and accuracy to the process. As such the number of staff required to complete activities outside of the BOTS will be reduced, this in turn will create a smaller and more agile team to specialise in the billing and debt recovery that sits outside the BOT capacity.

The team in its specialisation of tasks will therefore become centralised, removing staff from Hospital ownership and other non PD related tasks.

4. Effects of Change Proposal on Staff in the Department

Impact to billing staff: There were 4.8 Revenue Managers and are currently ~20 Billing permanent staff members.

The introduction of the Billing BOTS will see a graduated reduction of staff required in these roles over a 3 month period being 12 Billing Staff and 2 Revenue Managers (depending on the BOT performance results).

Staff required to engage the Automated Billing system will be provided with information for this new system. It is expected that there will be 12 positions as Revenue Officers and 2 positions as Revenue Managers to support the Automated Billing requirements going forward.

We will aim to provide suitable redeployment opportunities for staff whose roles are excess to needs in Billings. As some staff are picking up additional responsibilities within their current base hospital, there may be some opportunity for impacted staff to be redeployed within their base hospital.

5. Measures to Mitigate Effects on Staff

Consultation will occur with all impacted staff.

An Expression of Interest (EOI) process will be undertaken to appoint to the new roles.

Permanent staff who are impacted and do not wish to participate in an EOI process will be offered redeployment opportunities.

Staff who are unsuccessful in applying for a new role as part of the EOI process will also be offered redeployment opportunities.

Suitable options will be sought in conjunction with Human Resources, with vacancies investigated across both the SVHA Private and Public Hospital sites, as well as our Care Services division and Group roles.

SVHA will also provide comprehensive information in the use of the new system to all staff appointed to 14 roles.

6. Effects of proposal in other areas

There is potential impact to some sites where Billing staff were completing tasks not within their PD. Sites will need to be consulted as to these impacts to allow them suitable time to consider alternate options.

There are no other expected impacts of this change to other areas at St Vincent's Private.

7. Timeframe and Dates for Proposed Change

TBC and dependent on IT availability to implement new technology with external vendor.

8. Details of Staff/Union Consultations

The relevant unions will be advised prior to meeting with affected staff. Consultation will then commence.

Details	Dates
Employee meeting to discuss changes	3 September 2024
Distribution of Change Impact Statement, letter,	3 September 2024
Relevant Unions forwarded a copy of the Change Impact Statement	3 September 2024
Employee Consultation Period	3 September to 25 September 2024
Advising outcome of consultation	25 September 2024

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Date: 3 September 2024