

Arkansas-Patient Study Calendar

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1. Background

Appropriately routing charges for services covered by research funding is a key concern for research staff. At UAMS, all research participants' generated charges must be reviewed against the research study protocol to assess study-relatedness. This finance review of all entries from each participant's medical record is very time-consuming, redundant to the tasks completed by study coordinators for case report form (CRF) entry, and can lead to errors during billing review.

2. Goals

Establish a mechanism to capture all known charges the study could generate and put them in a platform that would work with our electronic medical record system to decrease the time spent on billing review and streamline research accounting.

3. Solutions and Methods

- A detailed research study budget is built to capture administrative time, pharmacy, Institutional Review Board (IRB), reimbursement, and screening fees as invoiceable study expenses. All study-related activities are built in the research study budget matrix to mimic the protocol study calendar including alternate, conditional, and outside tests, and study communications. All items within the budget are then tied to a billing indicator to assist with routing charges as routine care or payable by the sponsor.
- The research study budget is imported to AR-Patient Study Calendar (AR-PSC). Study coordinators review the participant's medical record and mark all completed activities in AR-PSC for each protocol time point. Ideally, this review is done within 5 days of the visit and upon CRF completion.
- Information from AR-PSC is used for billing review and then imported to the Research Accounting System to assist the finance team with accounting.

4. Outcomes

AR-PSC has decreased redundant processes and duplicate data entry, significantly improved data quality, and increased revenue. AR-PSC is also a quick central location for research staff to review the location of participant within the research study.

5. Lessons Learned

Initially, we didn't have a solution for capturing unscheduled visits or additional treatment due to adverse events in AR-PSC because these items cannot be accounted for on the study level in the research study budget. Over time, a process was developed to manually enter this information into AR-PSC on the participant level as needed. We have also added some reporting features to AR-PSC that we hope will continue to evolve over time.