

# Medical Report Refund Process

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**MRO and PSC Team**  
**Final Presentation**  
**7 May 2025**

Data Classification: [ ] Unclassified [ ] Restricted [X] Restricted, Sensitive Normal



# Background

<b>What is the issue?</b>	Long turnaround time (TAT) for medical report refunds, which currently averages of <b>61 days (Online) and 88 days (OTC)</b> .
<b>How does the long TAT arise?</b>	The issue arises when patients begin requesting refunds for specific reasons. These reasons include: <ol style="list-style-type: none"><li>1. situations where the medical report is no longer required by the requestor,</li><li>2. instances where the doctor is unable to complete the medical report, and</li><li>3. cases of incorrect payments made to KTPH.</li></ol>
<b>Why is the TAT so long?</b>	Primarily due to several factors that contribute to delays in the refund process. These include: <ol style="list-style-type: none"><li>1. <b>Delayed responses from requestors,</b></li><li>2. <b>Delayed in approving and raising refund requests.</b></li></ol>

# Background

## Who is impacted by the long TAT?

The prolonged refund process affects multiple parties.

1. **Requestors** - third parties, companies, and patients.
2. **Approvers and Verifiers** - finance teams, Business Office (BO) staff and Finance Shared Service (1FSS),
3. **Medical Records Office (MRO)** staff
4. **Other stakeholders** - Patient Service Center (PSC) and Specialist Outpatient Clinics (SOC)

## Where does the issue occur?

Delays occur at various stages of the refund process.

- a. Communication via emails often leads to delayed responses from requestors.
- b. Delays during the approval of refund requests in systems such as ePAS and eBAR.
- c. Raising refund requests in these systems also contributes to the overall delay.

# Reason for Action

To reduce the number of refund request.

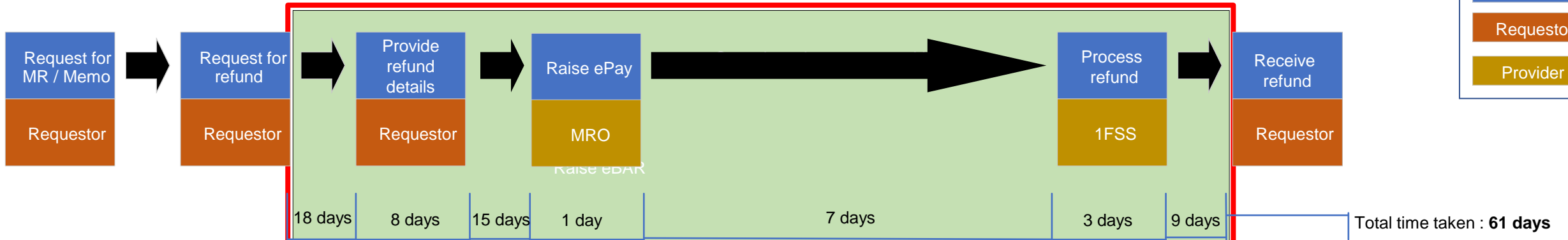
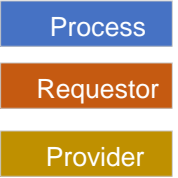
To reduce TAT for refund process.

To simplify the refund workflow for staff.

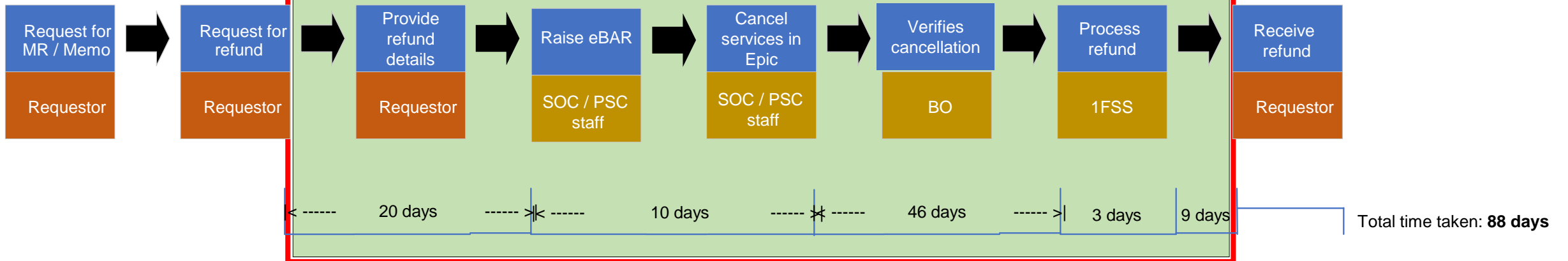
# Initial State

Online flow:

Legend:

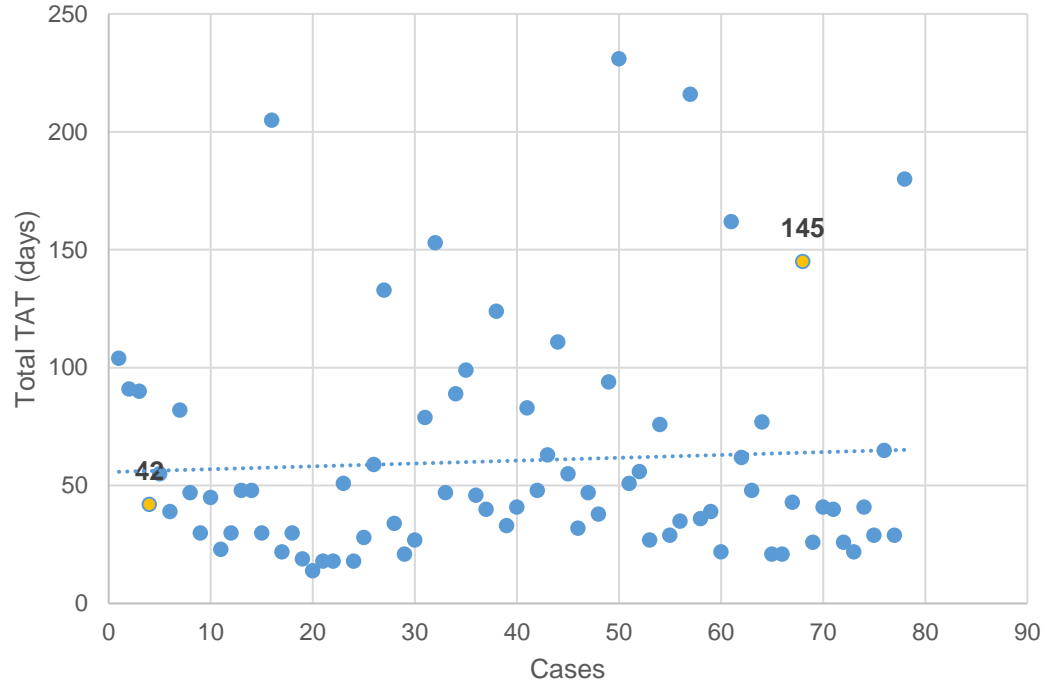


OTC flow:



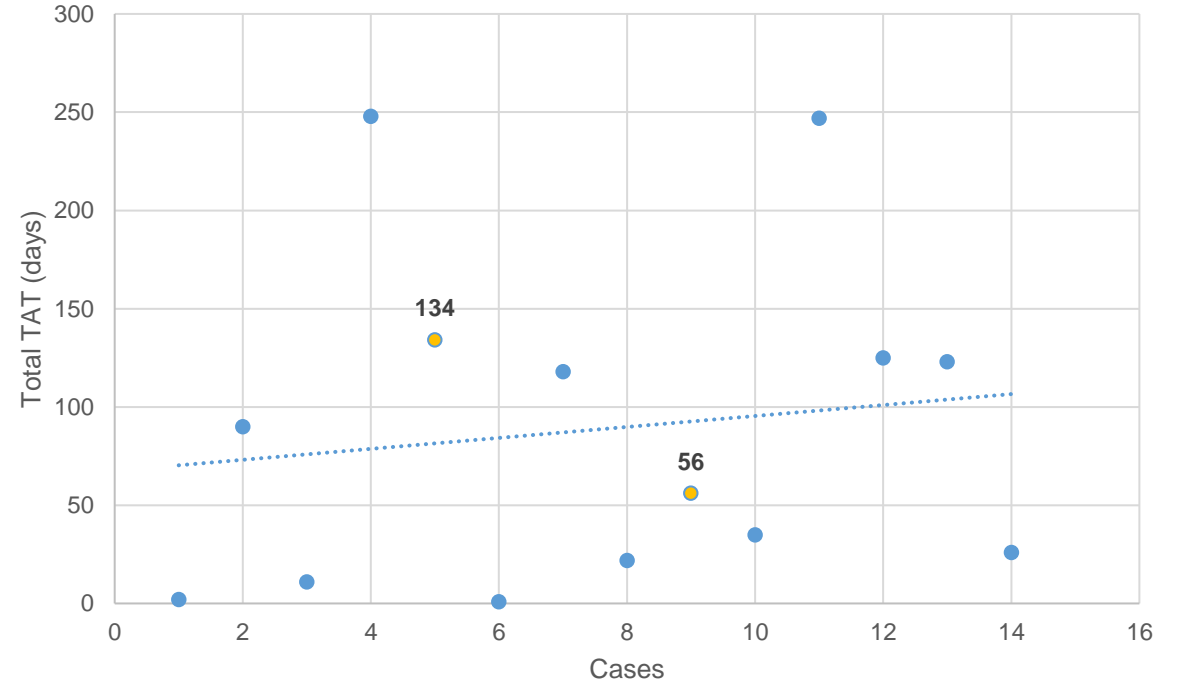
# Initial State

Total TAT vs cases for refund process –  
Sample 79 cases (Online)



Average TAT : 61 days  
90<sup>th</sup> percentile: 145 days  
50<sup>th</sup> percentile: 42 days

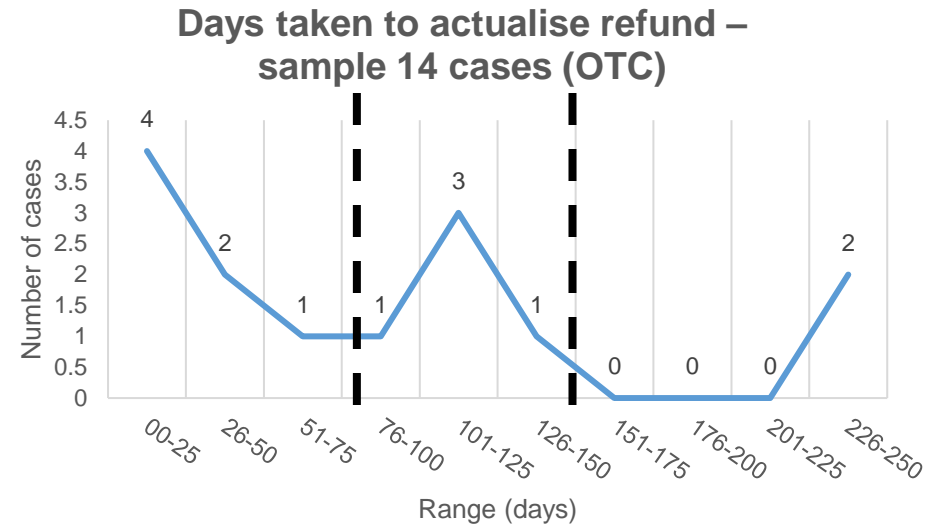
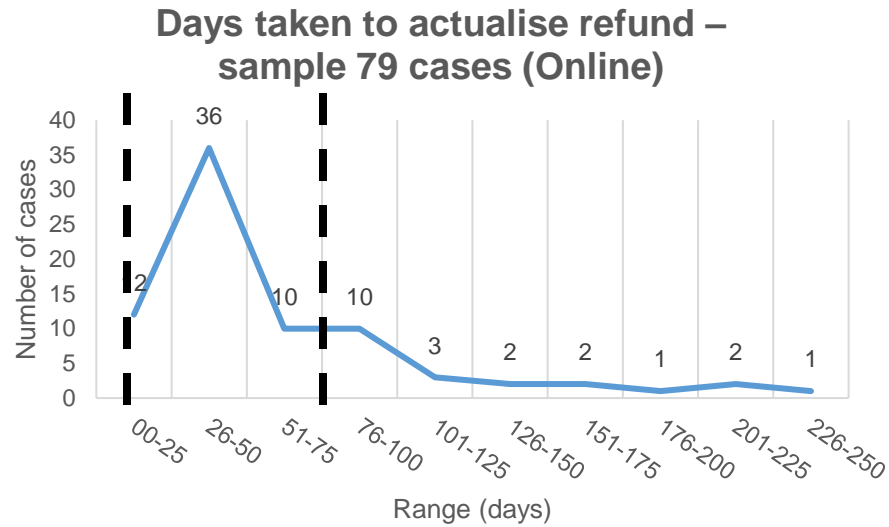
Total TAT vs cases for refund process –  
Sample 14 cases (OTC)



Average TAT : 88 days  
90<sup>th</sup> percentile: 134 days  
50<sup>th</sup> percentile: 56 days

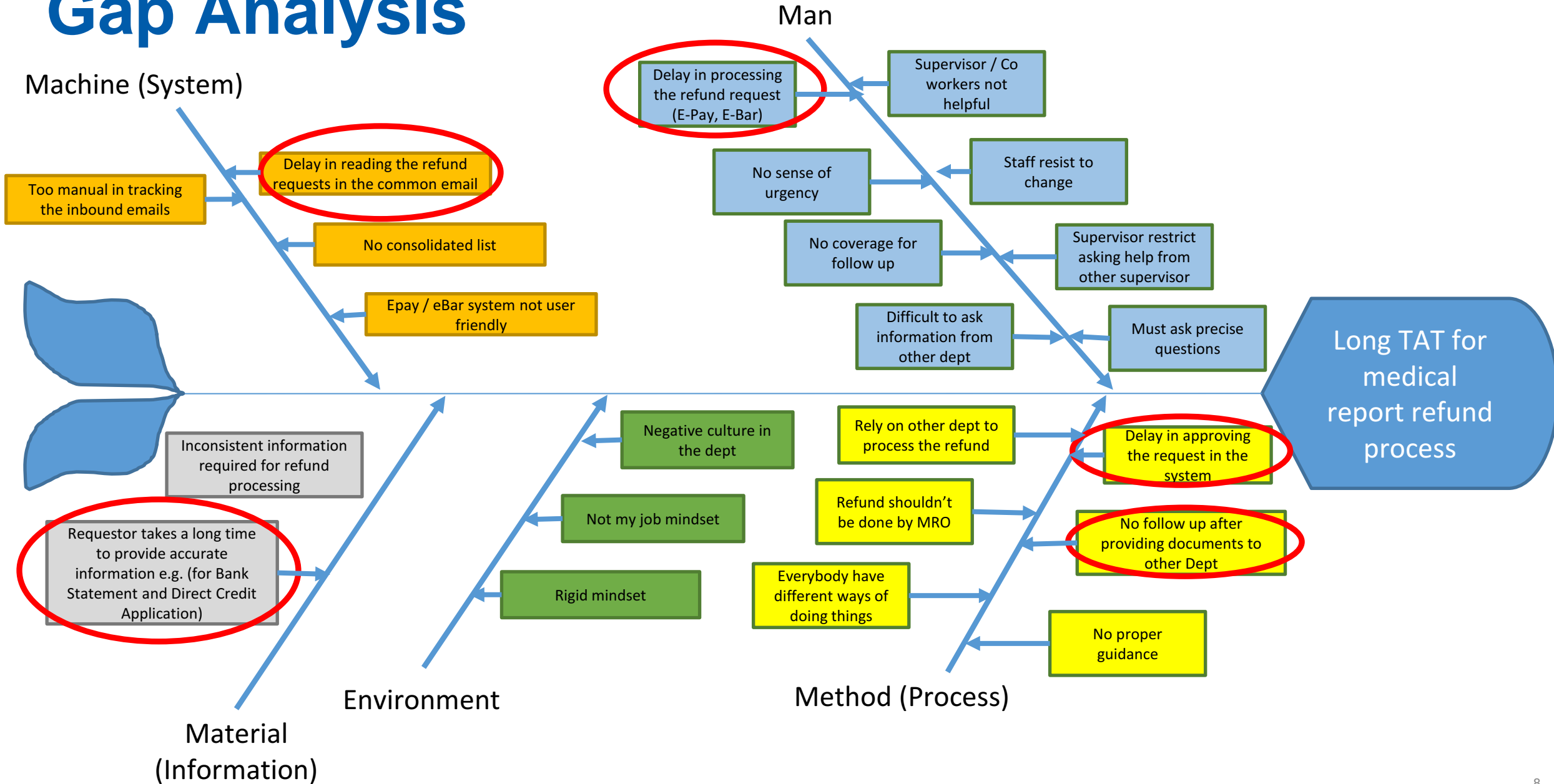
Data taken from FY 24 (April 24 – Dec 24)

# Initial State



This is to show that the spike is at the range between 26 – 50 days for online cases and 101 – 125 days for OTC cases.

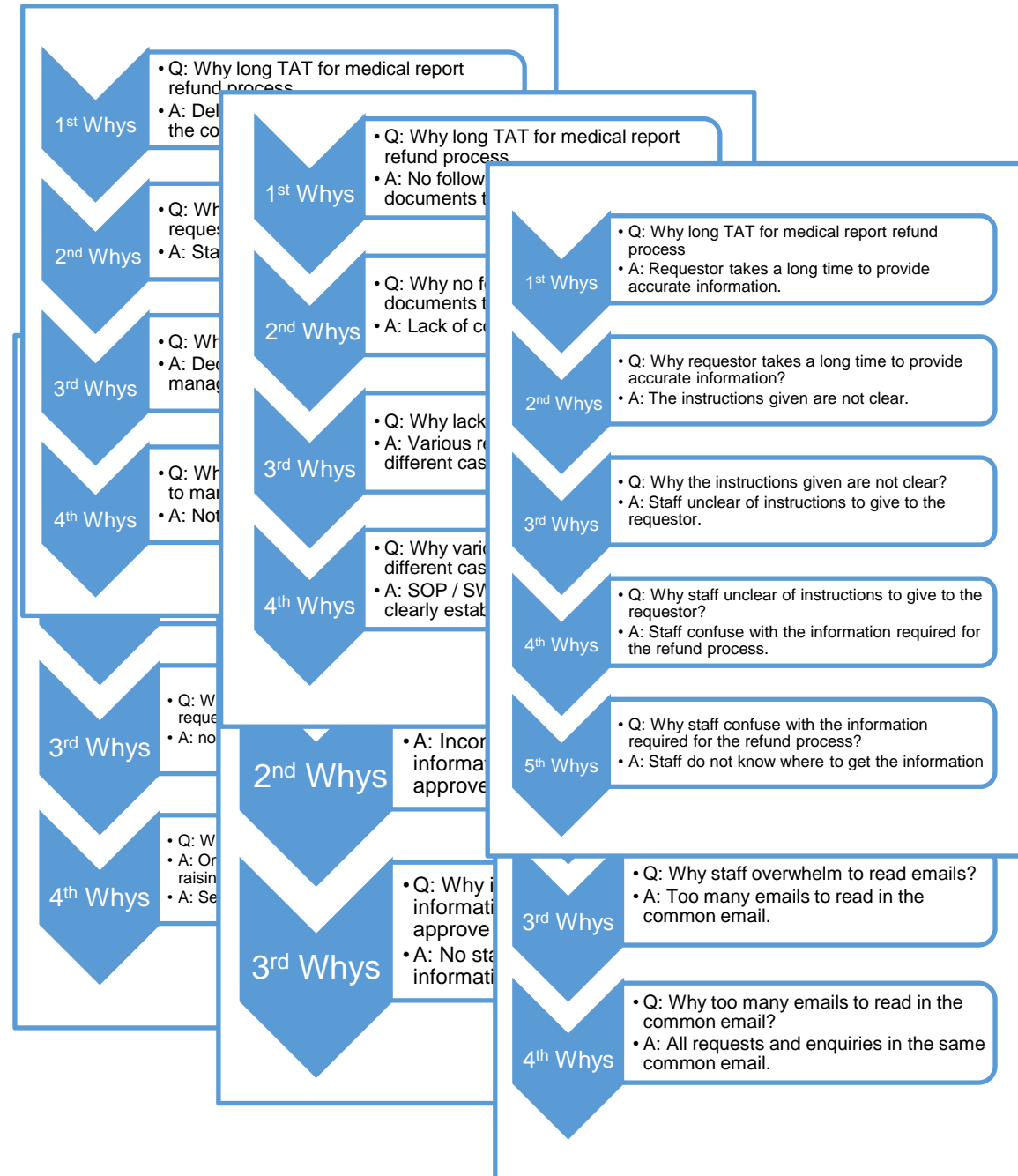
# Gap Analysis



# Gap Analysis

## Potential reasons after 5 whys:

- No standard process for information required
- SOP / SWI for refund process is not clearly established
- Not enough manpower
- All requests and enquiries in the same common email
- Staff not receptive to changes
- Staff do not know where to get the information



# Target State

To standardise the refund process.

To have a system to track refund status.

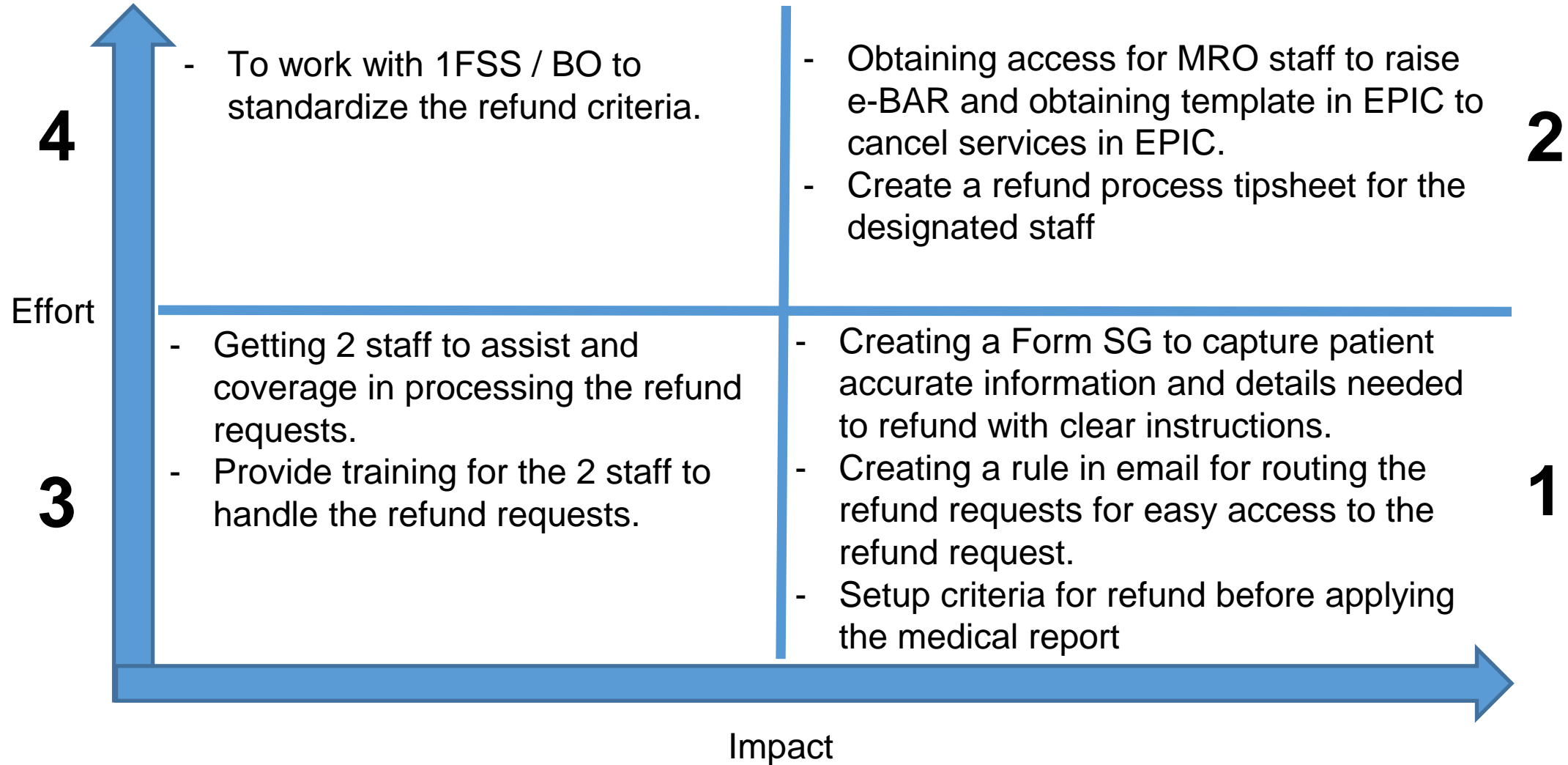
To reduce the average TAT from **61 days** (Online) and **88 days** (OTC) to **21 days**.

# Solution Approach

Potential Reason	Solution approach
SOP / SWI for refund process is not clearly established	<ul style="list-style-type: none"> <li>To work with 1FSS / BO to standardize the refund criteria.</li> <li>Setup criteria for refund before applying the medical report.</li> </ul>
No standard process for information required	<ul style="list-style-type: none"> <li>Creating a Form SG to capture patient accurate information and details needed to refund with clear instructions and start our TAT when MRO receive the successful request via Form SG.</li> </ul>
All requests and enquiries in the same common email	<ul style="list-style-type: none"> <li>Creating a rule in email for routing the refund requests for easy access to the refund request.</li> </ul>
Staff do not know where to get the information	<ul style="list-style-type: none"> <li>Create a refund process tipsheet for the designated staff.</li> </ul>
Not enough manpower	<ul style="list-style-type: none"> <li>Getting 2 staff to assist and coverage in processing the refund requests.</li> <li>Obtaining access for MRO staff to raise e-BAR and obtaining template in EPIC to cancel services in EPIC.</li> </ul>
Staff not receptive to changes	<ul style="list-style-type: none"> <li>Provide training for the 2 staff to handle the refund requests.</li> </ul>

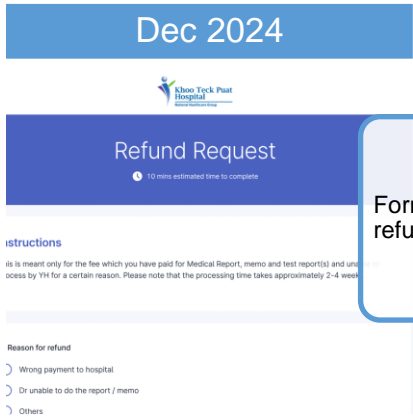
# Solution Approach

Prioritization Matrix:



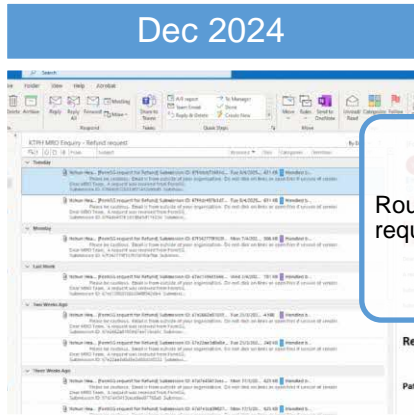
# Rapid Experiments

Dec 2024



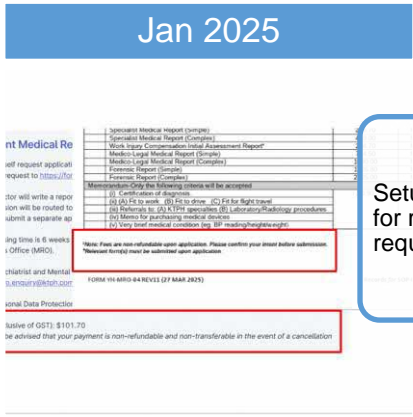
Form.SG for refund (pilot)

Dec 2024



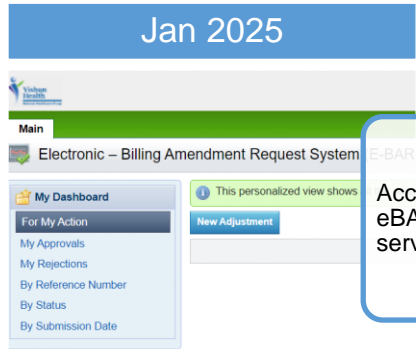
Routing Refund request in email

Jan 2025



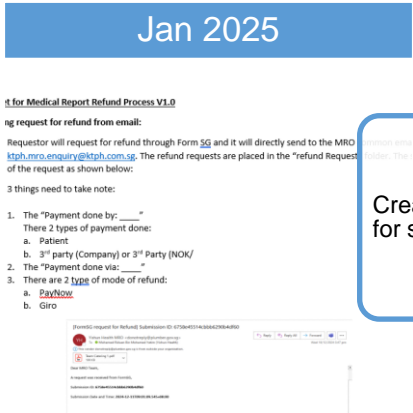
Setup criteria for refund request

Jan 2025



Access to eBAR / cancel services in Epic

Jan 2025



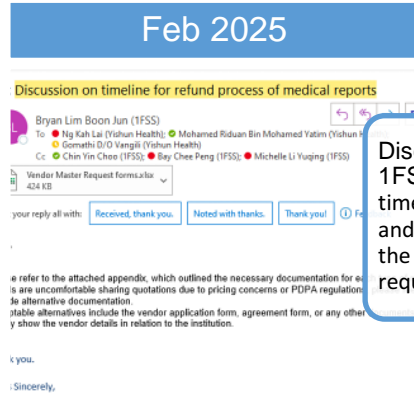
Create tipsheet for staff

Jan 2025 – Feb 2025



Train staff on using eBAR / cancel services in Epic

Feb 2025

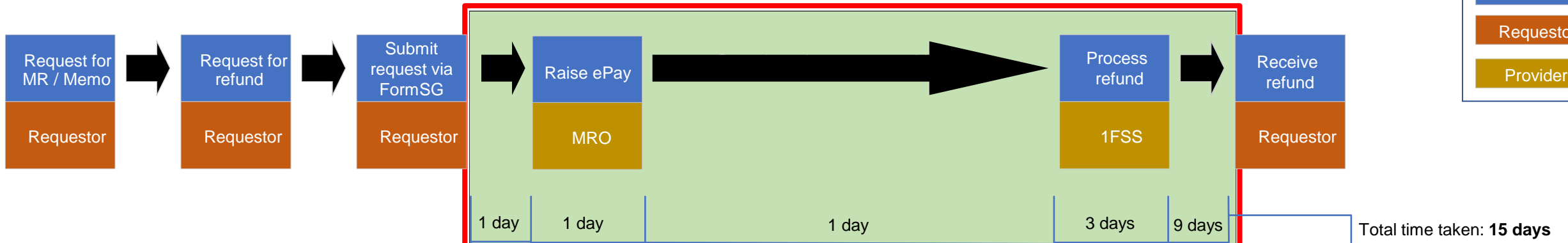
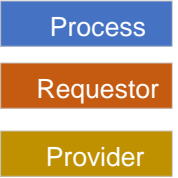


Discussion with 1FSS on timeline and understand the refund request.

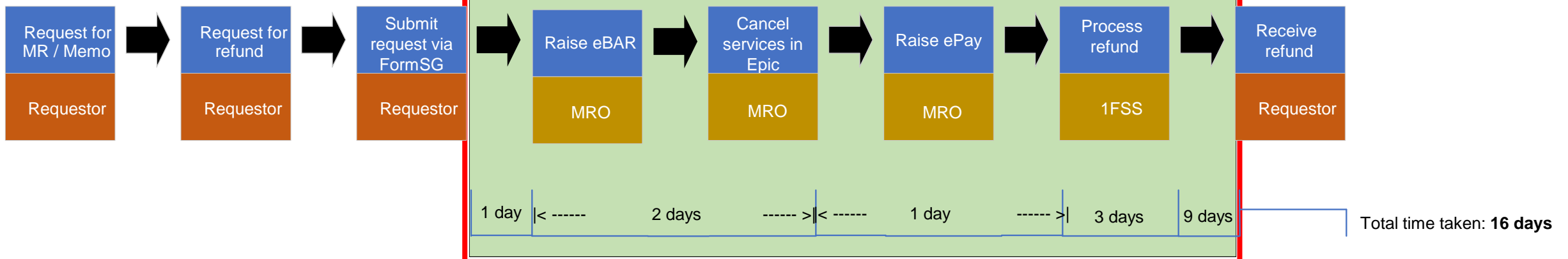
# Confirmed State

Online flow:

Legend:

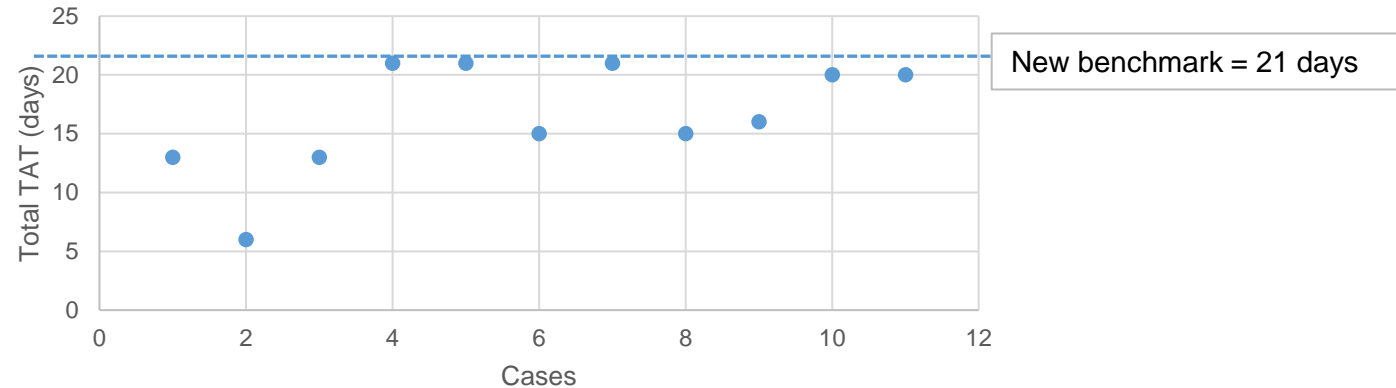


OTC flow:



# Cost Savings/Avoidance

Total TAT vs cases for refund process (to-be)



We have **11 cases** after the implementation of the new process for refund (Jan 25 till Mar 25).

Cost Savings	Cost avoidance
<p><b>Resource Optimization:</b></p> <ul style="list-style-type: none"> <li>- Reduced refund <b>9 cases per month (FY 24)</b> to <b>3 cases per month (Jan to Mar 25)</b></li> <li>- No. of FTE saved (per year) = <b>0.032</b> (For AA position)</li> <li>90<sup>th</sup> Percentile = 21 days</li> <li>50<sup>th</sup> Percentile = 15 days</li> <li>- Cost savings (per year) = <b>\$722</b></li> </ul>	<ul style="list-style-type: none"> <li>- Reduced the number of correspondence between requestors and stakeholders due to implementation of Form SG</li> </ul>
<p><b>Patient Benefits:</b></p> <ul style="list-style-type: none"> <li>- Reduced <b>average of 61 days</b> to <b>average of 16 days</b> when we kick in FormSG.</li> </ul>	<ul style="list-style-type: none"> <li>- Preventing delayed refund to requestors</li> </ul>

# Insights – What are the fundamentals lessons of the event & improvement cycle?

Strategies for spread:

To have standardized processes and well-documented SOPs, engage stakeholders and regular communication

## What went well?

- Better understanding of the workflow and clarity of roles.
- Refund cases reduced from average of 9 cases per mth (FY24) to 3 cases per mth
- Form SG was easy to set up .

## What helped?

- We managed to involve 1FSS for discussion and come out with the guideline for internal approval (documents required).
- Leading Kaizen helped us understand and apply the tools and methodologies in making continuous improvement to our daily work.

## What did not go well?

- Our BO colleagues were busy with NBS project and could not join us. The team managed to engage Finance on the new flow.

## What hindered?

- ❑ The current mode of cash payment at counter for medical report / memo request has hindered the implementation for a 100% cashless refund mode.

# Thank you!

