

Healthcare Management and Technology Consulting for Federal Government Agencies providing Regulatory, Payment Reform and Operational Guidance



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CEOCFO: *Ms. Reddix, would you tell us about ARDX?*

Ms. Reddix: ARDX is a healthcare management and IT consulting firm. We primarily focus on three areas, the triple aims for healthcare; population health, patient-centered healthcare and outcomes, and payment reform (three P's).

CEOCFO: *Who is turning to you and what are some typical engagements?*

Ms. Reddix: 98% of our client base is the federal government, specifically the Department of Health and Human Services (HHS). For the Centers for Medicare & Medicaid Services (CMS), we serve as a service provider to decipher complex legislation, create sub-regulatory guidance, and develop operational practices, so health plans who are the partners to the government can comply with the rules and provide healthcare to our nation. Specifically those that relate to Medicare Part C, Medicare Part D, and the Affordable Care Act (ACA), through the healthcare marketplace.

CEOCFO: *Many people have a dim view of how government handles healthcare regulations. How are you able, in your engagements, to make a difference?*

Ms. Reddix: I see a different perspective because I work with the government and I see that there is much time and attention given to the details to ensure that the rules that are enacted can be implemented in a sensible manner. How we assist with that is we link arms with our client, the various groups within CMS, to take the rules that are established and to use a project management based methodology to implement the requirements, both from a process perspective and also from a system perspective. We do a great deal of technical assistance to minimize misinterpretation of the rules and requirements. One of the ways we do that is we are the developer, implementer, and maintainer of the REGTAP (Registration for Technical Systems Portal) system. This system is one of the communication mechanisms for all of the qualified health plans nationwide to receive guidance and to ensure that it is version controlled. We communicate probably on a weekly basis with five to six thousand users of health plans to make sure there is true understanding of the requirements. Version control and understanding the management of the decision making is critical and that is a role that we play.

CEOCFO: *Would you give us an example of something that changed and how helped the organizations understand quickly what the changes are and how it affects them?*

Ms. Reddix: It could be as simple as a submission requirement for submitting claims data that has shifted. One example was when the nation moved to ICD-10, in which the implementation date changed numerous times. It was important that

we always stayed in synch with our communication when this would actually be enacted. It could be something as simple as that. Until that rule was put in place, the submissions of claims data had to continue to be ICD-9. It is important that you have a point person, a quarterback so to speak, that understands the moving parts and the implications if that part does not move exactly that way and what adjustments need to be made on a dime when things need to be modified.

CEOCFO: *How do you understand what some of the ambiguously word regulations mean?*

Ms. Reddix: We read. We work with the government before the information is actually made public. This allows us time to come up to speed and have a better understanding of the reason behind the regulations. There are many business cases that are analyzed prior to anything actually being official. Being involved from the inception, provides us the ability to assist in developing what the actual operational practice will be.

CEOCFO: *How are you able to work with all the different systems that any healthcare provider or agency has in place?*

Ms. Reddix: From the role that we play, these are systems that are required. We are developing rules for systems that regardless of what claims processing system and organization they use, it has to be able to speak to submitting to the government system. We are not really working with disparate systems. These are the requirements, so as you are configuring your systems, you have to configure them to these rules.

CEOCFO: *Do you work with the common systems?*

Ms. Reddix: We do know the common systems. We create documentation all the time. Any programs that we use are 508 compliant, so that it is accessible by all, even those with disabilities. It is a requirement. We use systems that are compatible across the board for various word processing systems, viewers, and browsers.

CEOCFO: *Would you tell us about the recent project with CMS? Is that typical for you?*

Ms. Reddix: It pretty much summarizes what I was saying earlier about speaking on behalf of the government, assisting health plans and understanding the requirements, training and technical assistance, writing requirements for system upgrades for the government systems, and ensuring that the arrow codes are current, the reporting that goes out to all the submitters is accurate, and integrating other contractors to ensure that the project management of the overall initiative. We support the project management of any of the implementations listed.

CEOCFO: *What has changed in your approach over time?*

Ms. Reddix: The fact is companies are living organisms. As you are growing, you learn more about yourself, what your needs are, and who you need to attract. I would say the biggest thing that has changed about ARDX is we are very clear about who we are and therefore, we attract the right individuals to be members of our team. That fits more naturally as opposed to either the company trying to conform to individuals or the individuals conforming to a company. We are very laser focused on our mission that shifted through time. You learn, develop, grow, and figure out what your niche is. We are very clear on the three P's and we try to attract people who are passionate about working specifically in those three areas: population health, patient-centered healthcare and outcomes, and payment reform. Our talent acquisition strategy has tremendously changed in the last ten years.

CEOCFO: *How do you prepare for what is coming up or the possibilities or is it more that you are able to address them rapidly as changes are instituted?*

Ms. Reddix: We have quite a bit of rigor around risk management, so we are always looking at external threats in our planning. We try to position ourselves to be situated not just to handle the activities of today, but plan for the future, so we follow the trends and ensure that we are attracting the experts at our table that will help position us for the direction of the future. None of us have a crystal ball. To a certain extent, you can plan all you want, but you have to also be ready to just act as you are given new opportunities.

CEOCFO: *Community involvement is clearly important for ARDX. How have you decided where to focus?*

Ms. Reddix: Initially, the focus started in the first year of the company. Our contracts were regarding health insurance, the cost of healthcare and seeing what is causing the cost to rise. There are chronic health conditions, many of which the root cause is obesity. Our focus has been to combat those things that are the causes of increased healthcare costs and to start with the younger population where we have an opportunity to change behaviors. We focus on at risk populations in the underserved communities and teach them healthy eating and exercise habits. We focus on women's health because women, in many cases, drive the behavior of the children in the household. If we are trying to decrease risky behaviors that increase health issues, we have to start by tackling the household. Those are two major focuses, the youth and population health, and those who impact the thought process of the youth, who would be the women.

CEO CFO: How do you decide what to pursue as business opportunities?

Ms. Reddix: We review opportunities based on what is forecasted. We determine what a natural extension of who we are is and that will allow us to leverage the skills, interests, and abilities of those in the organization. Then we project three years out what we need as far as a staffing model and a leadership model to support the areas that we would like to grow into. 2016 was a significant year, with significant investment and leadership for tomorrow. We are moving more into the data analytics and business intelligence areas, both of which are a natural progression for ARDX. We do some of that currently, but as a focus area that has not been our primary focus, so we are looking at growing in that area.

CEO CFO: Your site indicates that putting people first is important. What does that mean day-to-day?

Ms. Reddix: Day-to-day means making sure you have the right individuals in the right seat at the right time. If that happens, naturally you are all passionate about the same things, so the work that you are doing is rewarding. You are putting your associates first, which allow us to put our customers first, which is the government, but behind the government, they are people. What we do as far as the importance of our implementation impacts every American because it is about our nation's healthcare. On all fronts, we touch people at the very core of what is really important, so we try to keep our minds focused on that regardless of our role in the organization, whether it is HR, finance, or actually working on the contracts with the customers.

CEO CFO: Why choose ARDX?

Ms. Reddix: We are more than a traditional consultant firm. We are true partners to our clients with an Associates who care about not only the deliverable, but the entire healthcare ecosystem. We are passionate about impacting major healthcare implementations that will have a positive impact to our neighbor, our surrounding communities, and the nation.



Solving Healthcare Complexities

Integrating Policy, Payer, Provider, and People.