



Keep the Cycle Going:
Maintaining a Healthy Long Term Care
Revenue Cycle and Key Strategies for
Successful Reimbursement Management

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What is a Cycle?

“By law of periodical repetition, everything which has happened once must happen again and again -- and not capriciously, but at regular periods, and each thing in its own period, not another's and each obeying its own law.” -Mark Twain



Learning Objectives

- > Develop understanding of revenue cycle components
- > Identify proper revenue cycle processes and reporting
- > Utilize strategies for monitoring revenue cycle health



Overview

- Types of Facilities
- Key Stakeholders
- Revenue Cycle Overviews
 - Skilled Nursing
 - Assisted Living
 - Independent Living
- Components of the Revenue Cycle
- Financial Reporting
- How to Make it All Work



Types Of Facilities

- Nursing Home
 - Skilled Nursing Services
- Assisted Living
 - Personal/Custodial Care
- Independent Living
 - Part of a Continuing Care Retirement Community (CCRC)





Key Stakeholders

- Admissions Department
- Nursing Staff
- Social Services
- Clinical Reimbursement Staff
- Billing Office Staff
- Executive Team



Skilled Nursing Revenue Cycle Overview

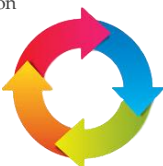
- Scheduling/Pre-Admission
- Admission/Insurance Verification
- Contract Management
- Managed Care Authorization
- Census Management





Skilled Nursing Revenue Cycle Overview (cont.)

- Case Management/Clinical Documentation
 - MDS Assessments
 - Coding
- Billing and Collections
 - Claim Submission
 - Denials Management
 - Cash Posting and Reconciliation
 - Accounts Receivable Follow Up
 - Private Pay Billing
- Miscellaneous Revenue Cycle Items





Assisted Living Revenue Cycle Overview

- Admissions
- Financial Screen
- Census Management
- Level of Care Assessment
 - Develop Support Plan
- Billing and Collections
 - Cash Posting
 - Private Pay Billing





Independent Living Revenue Cycle Overview

- Admissions
- Financial Screen
- Census Management
- Billing and Collections
 - Cash Posting
 - Private Pay Billing





Examining the Revenue Cycle

1. **Review** each part of the revenue cycle to identify how to further avoid inefficient processes
2. **Reduce** billing errors that result in claim denials
3. **Reevaluate** staffing and stakeholder responsibility
4. **Develop** dashboards to monitor departments



Pre-Admission and Admissions

- Pre-Admission Screening and Scheduling
 - Referral sources gather information for admission
 - Hospital
 - Nurse Liaison
 - Marketing/Sales Coordinator
- Admissions
 - Ensuring accurate information comes from the referral sources
 - Patient Demographics
 - Insurance Information
 - Responsible Party Information
 - Focus on timing of verification and verify all insurances



Admissions Cont'd



- Financial Screen
 - Asset verification
 - Income verification
 - Any open, current balances?
 - Advance Deposit and Escrow
 - Bank Accounts
- Financial Consultation
 - Financial Screen Analysis
 - Start the Medicaid Application process if necessary
 - Enroll in RFMS or Direct Deposit
- Admissions Documentation
 - Signed Admissions Agreement; POA Documents
- Process in place to deny admission?



Contract Management

- Negotiate rates appropriately
- Review contracts on a regular basis
- Confirm rates are paid according to contract
- Educate staff on payor specific contracts
 - Clinical Staff
 - What types of services can authorized
 - Levels of care
 - Billing Staff
 - How services are reimbursed



Managed Care Authorization

- Applies to Skilled Nursing only
- Utilize payor contracts
- Ensure correct authorization is obtained
- Authorization timely filing periods
 - Decreased timeframe to obtain retro authorization
- Pending Authorization Process
 - What is the follow up protocol?
- RUG Assignments
 - How is this evaluated?



Census Management

- Admissions Department
 - Enter demographics and verify payor information
 - Set up reimbursement table
 - Applies to readmissions, bed holds and discharges
- Confirmation of Admission
 - Nursing Staff or Social Services?
 - Admissions or Sales for AL or IL
- **Recommendation:** Facilities should keep a manual census to reconcile with the EMR system
- Evaluate your EMR system and staffing
 - Different systems may cater to various organizational workflows



Case Management/Clinical Documentation

- Diagnosis Coding
 - ICD-10 Compliance
- MDS Assessments
 - Submitted and locked timely
 - Implications of assessment changes
- Level of Care Changes
 - Communication process
 - Timing
- Triple Check Process
 - Coordinate with the Billing Office





Billing and Collections

- Claim Submission
 - Accurate payor setups
 - Clean Claims
 - Electronic Billing
 - Claims Clearinghouses
- Denials Management
 - Tie back to Pre-Admission, Admission and Census
 - Billing software edit checks
 - Claims Clearinghouse error reporting
 - Staff education on common denial reason
 - Develop strategies and approaches to work denials





Billing and Collections Cont'd

- Cash Posting and Reconciliation
 - Ongoing daily and weekly process
 - Determine if further follow up is needed
 - Work issues at the time of posting
- Accounts Receivable Follow Up
 - Timely Filing Limits
 - Electronic Payor Portals
 - Medicare- FISS
 - State Medicaid- ex. PA Promise
 - Managed Care- ex. Navinet
 - Develop AR Strategies
 - Maximize highest dollar collections



Billing and Collections Cont'd

- Private Pay Billing
 - Applies to all facilities
 - Determining Private Pay Rates
 - Private vs. Semi Private Room
 - Levels of Care (Personal Care)
 - Rental Rates (Independent Living)
 - Applying discounts and credits
 - Utilize RFMS and Direct Deposit
 - Establish Payment Deadlines
 - Billing Office Collections Schedule
 - Enforce Late Fees
 - Collection Letters



Miscellaneous Revenue Cycle Items

- Bad Debt Write Offs
 - Utilizing a Bad Debt Log for Cost Reporting
 - Establish a process in the billing office
- OME Process
 - Screen the OME request
 - Is it an allowable OME?
 - What is the MA recipient category (PAN vs. TAN)
 - Entering into the billing system
- Billing Compliance
 - No payment claims
 - Credit balances
- Nursing Home Assessment





Financial Reporting

- Identify what reports are needed
 - Billing System
 - Manual Excel Report
- What reports are effective and who is utilizing these reports?
- Utilize Workflow Assessments for each department
 - Report timing

FINANCIAL REPORT



How to Make it Work



➤ Avoid the Silo Effect

- Communication
- Meetings
- Set reasonable deadlines
- Problem solve together



How to Make it Work



➤ Educate and Train

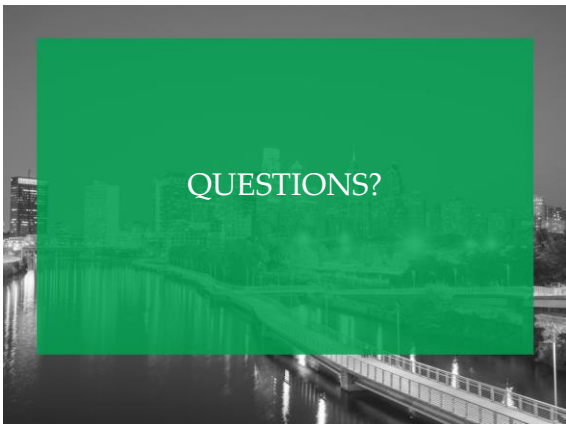
- Implement training programs for staff
- Opportunities for continuing education
- Cross training

How to Make it Work



➤ Implement Goals

- Increase productivity
- Motivate and encourage staff
- Enforce quality and accuracy standards
- Periodic QA reviews
- Hold staff accountable



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Thank you!