

MANAGED CARE

checklist

Maximize your reimbursement.

- Establish authorization process with therapy partners
- Take an inventory of managed care contracts
- Communicate contract terms to staff - reimbursement criteria, pay types, delivery of care mandates, authorization requirements
- Determine method of reimbursement - PDPM, visit rate, old RUG model
- Review inventory for outdated contracts
- Research and target new payers - review declined admissions/payer out-of-network or CMS list of payers with highest local enrollment.
- Stay on top of CMS Five Star ratings - minimum three stars to negotiate with MCOs; five stars likely required in metro areas
- Monitor your outcomes - readmissions, discharge to home/hospice /other, average length of stay, admissions by insurance company
- Compare your stars and outcomes to competitors
- Diligently document care - a top reason for denial is neglecting authorization of care requirements
- Seek out forums with hospital liaisons and competitors to jointly address various payer issues

