

# FORVIS™

## SNF Billing 101: Common Problems & Helpful Processes

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# Meet the Presenters



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# AGENDA



**ADMISSIONS**



**PROCESSES**



**CLAIMS**



**PAYMENT**



**DOCUMENTATION**



**FOLLOW-UP**

# WHO IS PAYING?



## PRIVATE

- Hospice
- Medicaid Pending
- Medicaid Liability

## MEDICAID

- Hospice Medicaid

## MEDICARE

- A & B
- Consolidated Billing
- Compliance Claims

## INSURANCE

- Medicare Advantage
- Coinsurance
- Long-Term Care Policies

# PROCESS



# Software Process

## Who Inputs What?

- Demographic Info
- Census/Payer Changes
- Charges

## How Is Information Stored?

- Patient Data
- Underlying Support

## Resident Communication

- Out of Pocket

## System Updates

- Rates
- Users
- Security



# Claim & Follow-Up Process

## Triple Check

What Information Is Verified & When?

Are Claims Accurate & Supported?

## Follow Up

Tracking Collection Efforts

When Should Claims Be Paid?

Tracking Medical Review

# Payment Expectations

PRIVATE	MEDICAID	MEDICARE	INSURANCE PRIMARY	INSURANCE SECONDARY
30 DAYS	30 DAYS	30 DAYS	30 DAYS	45–60 DAYS

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# Triple Check Resource

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# POSTING



# Payment Posting

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## Accuracy

Patient

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Payer

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Date

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## Adjustments

To Adjust or Not To Adjust

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## Bad Debt

Is All Bad Debt Bad?

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## Reconciliation

Bank Statement

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Resident Trust

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# Billing Turnover Pain Points

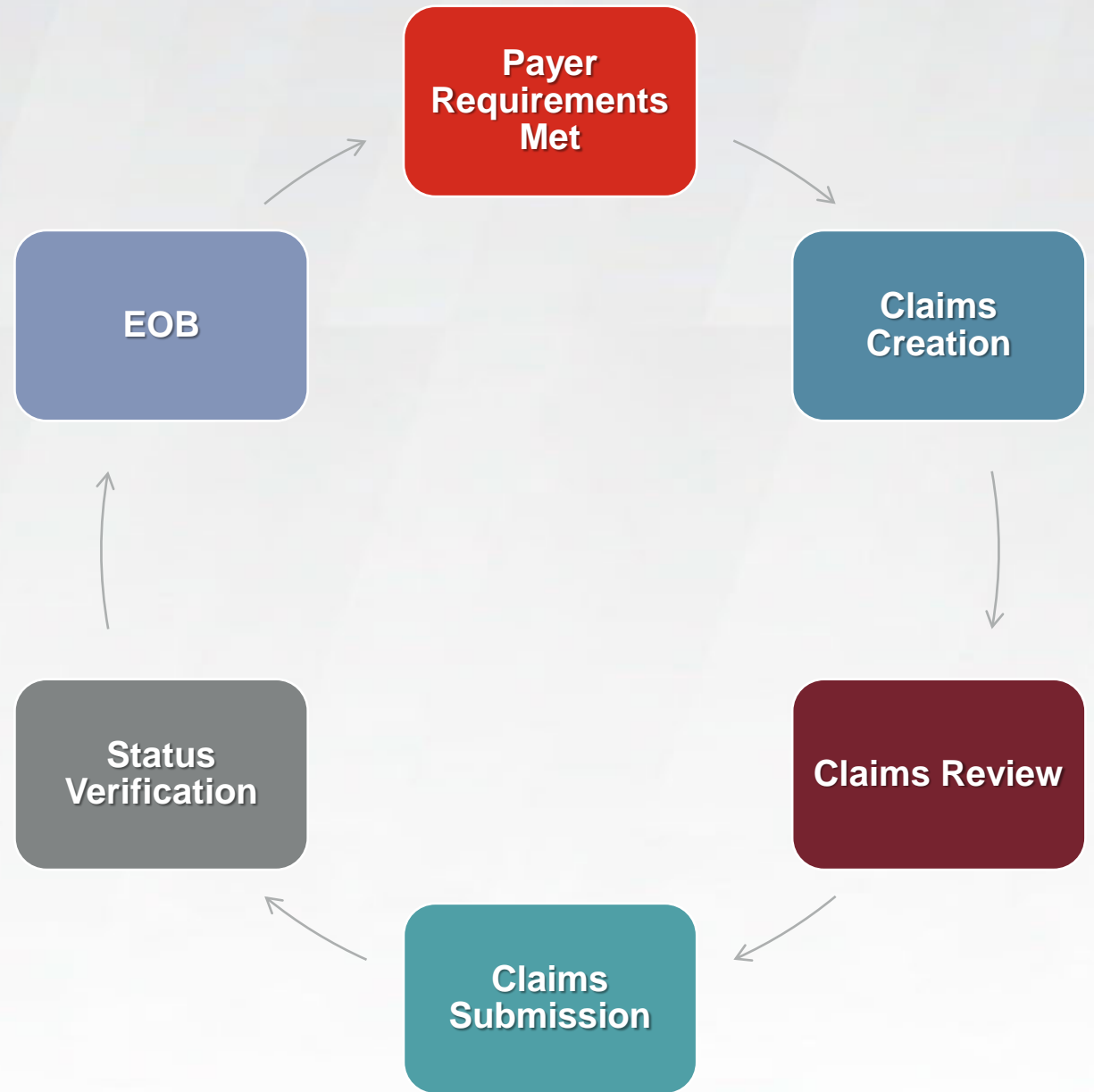
- **Payment Delays**
- **Timely Filing Denials**
  - Untimely claims submission &/or follow-up
- **Compliance Issues**
  - Missing authorizations
  - Documentation issues

# Rate Calculator



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# Overview





# OVERSIGHT



# How Well Do You Know Your Aging?

## Tracking Medicaid Pending

### Private

- Collections Policy/Processes

### Third-Party Payers

- Current Status

### Aging Meetings

- Frequency
- Process

# Additional Tools

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# Questions?



# Connect With Us



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