

Burden of Care Documentation Audit

Inpatient Rehabilitation Units and Hospitals are facing increased financial pressure due to the COVID-19 pandemic. Since we shifted functional measures, patients' level of assistance is often not fully captured in the IRF-PAI data, leaving a gap between the care delivered and the reimbursement received for those patients.

Fleming-AOD Consulting has developed a consulting package to assist rehabilitation providers with closing the documentation gap that leads to discrepancies between burden of care and reimbursement. We help clients by analyzing hospital operations, determining where opportunities exist to improve documentation and IRF-PAI coding to accurately reflect the burden of care, educating hospital staff and physicians on findings, and recommending a plan to capture the reimbursement that matches the care rendered.

This service is a three-part process:

▶▶ Step 1 – Case Mix Index review

- Review CMI components to identify quality measures/financial drivers that are lagging comparison benchmarks.
- Analyze eRehabData reports and historical data.
- Deliver data analysis with industry comparisons and trends.

▶▶ Step 2 – Operational review

- Examine the coding and functional scoring process.
- Survey the care delivery and case management process.
- Deliver an operational assessment and detailed recommendations for improvement.

▶▶ Step 3 - Records review

- Assess documentation to locate missing reimbursement opportunities due to either inaccurate coding of rehab Impairment Groups, etiologic diagnoses, or comorbidities; or inaccurate scoring of functional measures.

Our clients report:

"We will realize an additional \$879,000 this year thanks to better coding and patient selection."

"We have captured an additional \$1,076 per discharge since our engagement."

"Our case mix index increased from 1.1166 to 1.2818, adding \$1,782 in reimbursement to each discharge."

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Availability: Contact Lisa Werner by calling (240) 386-7876 or e-mailing lwerner@flemingaod.com to begin the process.

Auditing will be completed remotely by utilizing video conferencing and EMR or chart access.