

KanTime
Healthcare Software

HOW
BETTER
HAPPENS.

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Ready or Not: RCD is Coming!



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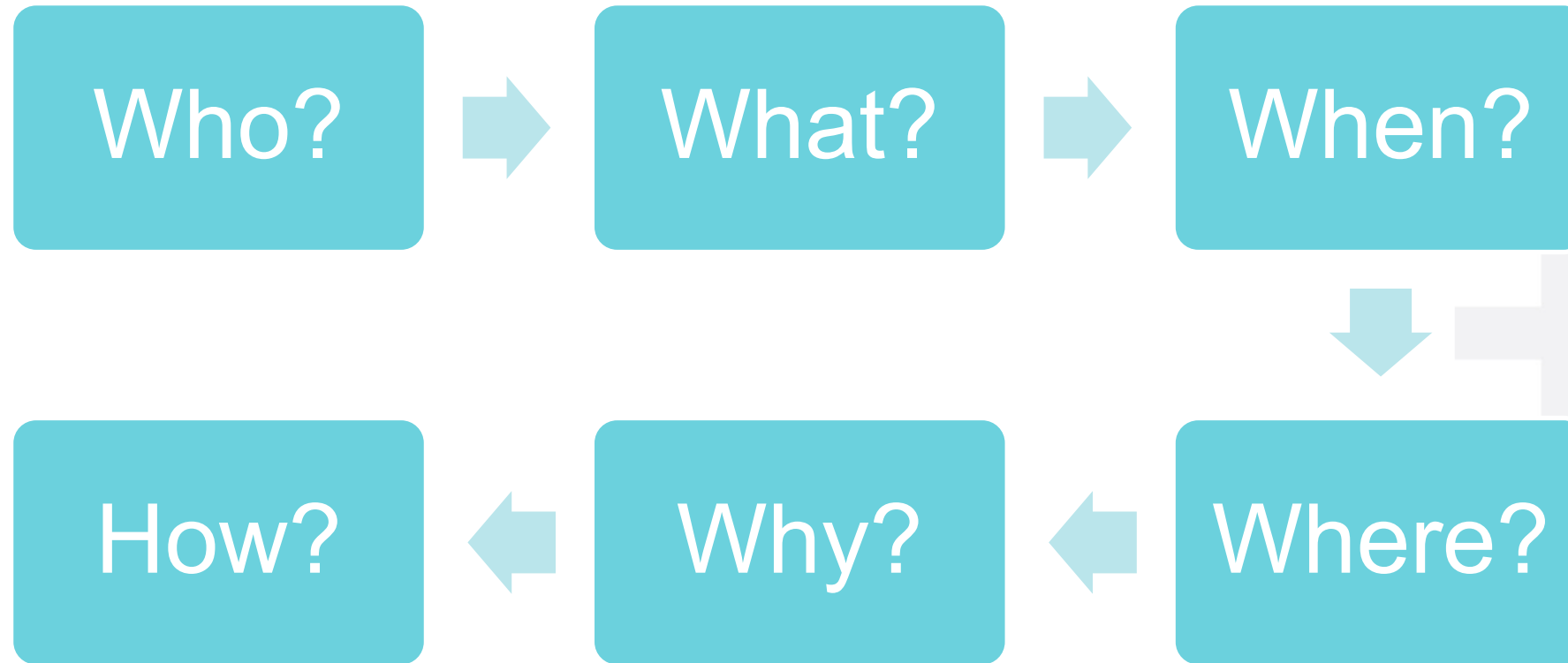
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Agenda



Who?

- The Centers for Medicare and Medicaid Services (CMS)



- Office of the Inspector General (OIG)



- Many other governmental agencies

What?

- Review Choice Demonstration (RCD)
 - **Helps to identify and prevent fraud**
 - **Protect Medicare beneficiaries**
 - **Safeguard taxpayer dollars**
- Overall Goal
 - **The right payments are made at the right time**
 - **Protects funding**
 - **Reduces appeals**
 - **Improves compliance**



When & Where?

- When?
 - June 1, 2019 – May 31, 2024
- Where?
 - Illinois, Ohio, Texas, North Carolina, & Florida
 - Palmetto GBA (Jurisdiction M)
 - Changes in effect 8/1 & 9/1!

Challenge Question

- Why is CMS conducting the Review Choice Demonstration?

Challenge Question

- Why is CMS conducting the Review Choice Demonstration?
 - **To improve the incidence and reduce the amount of fraud and abuse in Medicare's Home Health benefit**

How – Phase 1



PCR

Post-Payment Review (default)

Minimal review w/payment reduction

How – Phase 2



PCR

Selective post-payment Review (default)

Spot checks

Challenge Question

- During the initial phase of the RCD, if the HHA does NOT choose option 1, 2, or 3 which option will they be automatically placed in?

Challenge Question

- During the initial phase of the RCD, if the HHA does NOT choose option 1, 2, or 3 which option will they be automatically placed in?
 - **Option 2, Post-Payment Review**

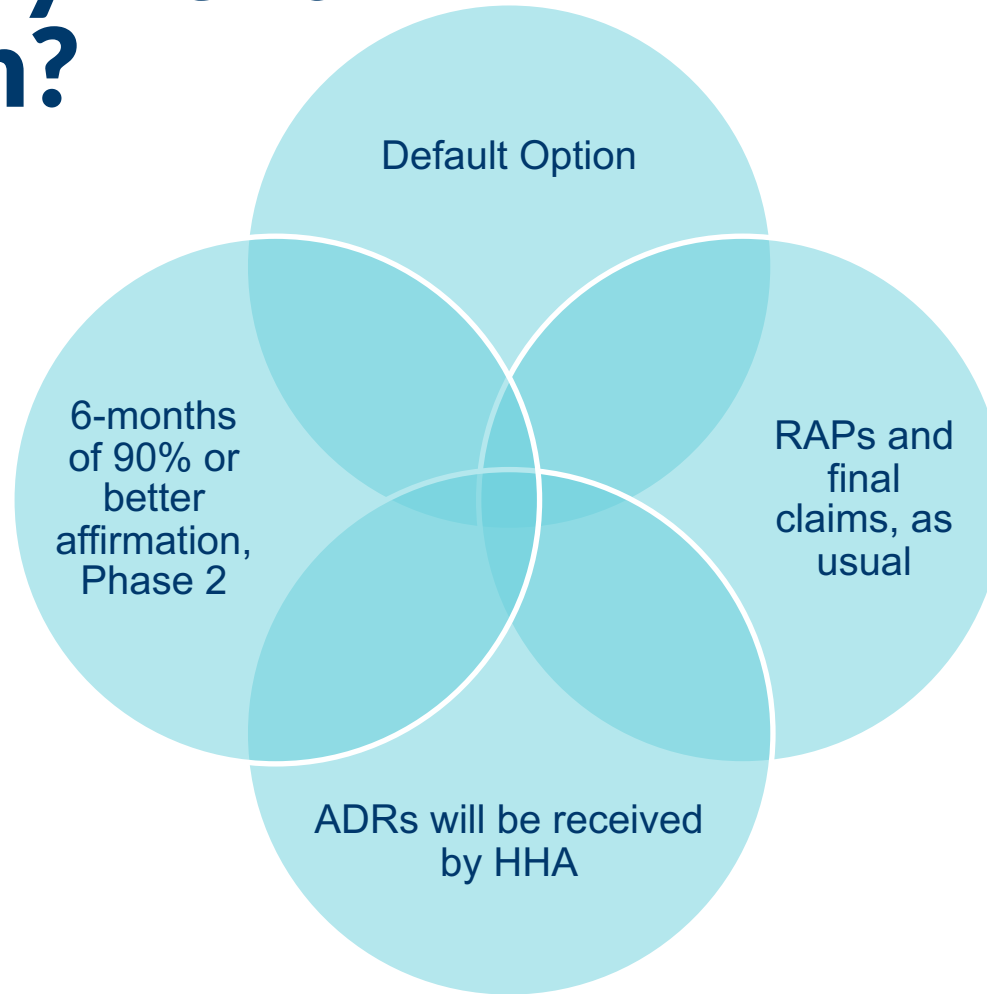
What happens in the 1st phase PCR option?

- After PCR submitted, contractor has 10 days to respond with UTN
 - **UTN – Universal Tracking Number**
 - **Decision options**
 - Affirmed
 - Partially Affirmed
 - Non-Affirmed

What happens in the 1st phase PCR option?

- Some notes:
 - Services can begin prior to a PCR decision
 - PCR may include more than one billing period
 - If no PCR, no reimbursement and payment reductions will follow
 - UTN, rendering providers NPI, CCN, HHA name, & HHA address are required on the final claim
- After 6-months of 90% or better affirmation, HHA can move into Phase 2

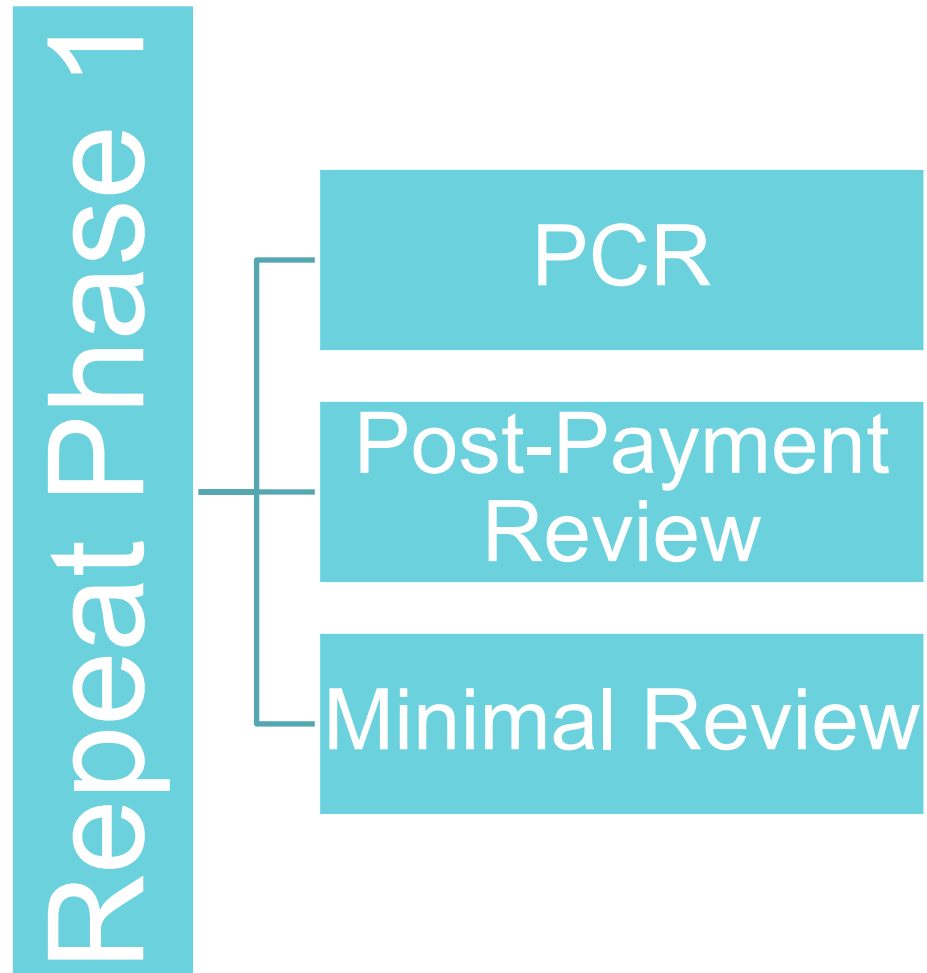
What happens in the 1st phase Post-Payment Review option?



What happens in the 1st phase Minimal Review option?

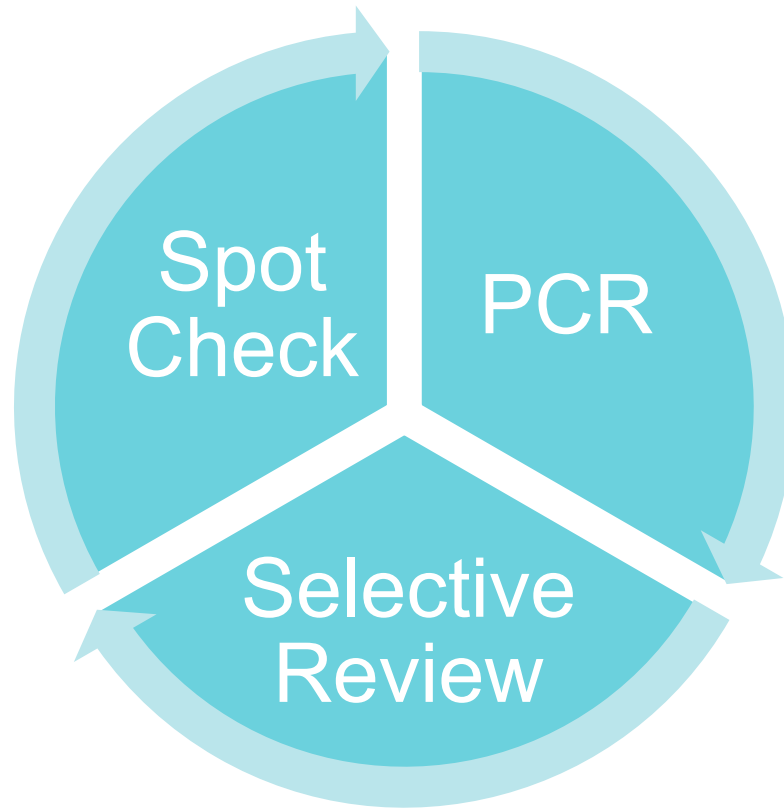
- Officially known as the minimal post-payment review with a 25% payment reduction option
- 25% payment reduction on ALL payable claims
- Claims excluded from probe and educate reviews but NOT from RAC audits
- HHA will remain in this option for the duration

What if I do not meet the 90% or better affirmation rate?



What if I do meet the 90% or better affirmation rate?

- You get to move into Phase 2!!



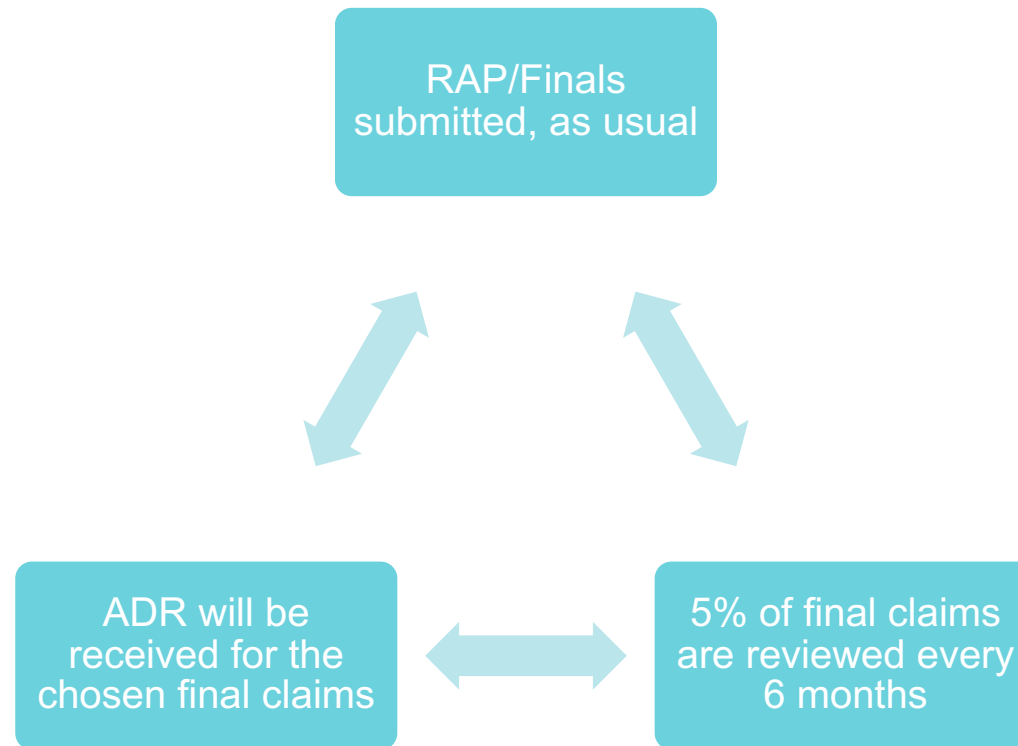
What happens in the 2nd phase?

- PCR option
 - Same process as in Phase 1
- Selective post-payment review option
 - Default option
 - RAPs and final claims, as usual
 - SVRS every 6-months



What happens in the 2nd phase?

- Spot check option
 - **RAPs and final claims, as usual**
 - **5% of final claims every 6-months via ADR**



Challenge Question

- What happens if a HHA does not earn and maintain the 90% or better affirmation rate during Phase 1 of the RCD?

Challenge Question

- What happens if a HHA does not earn and maintain the 90% or better affirmation rate during Phase 1 of the RCD?
 - **If the HHA does not meet compliance with the 90% or better affirmation rate, they will be asked to repeat Phase 1 and make a choice between options 1, 2, or 3 again**

One EMR for All Your Lines of Business

What Our Customers Are Saying:

"Without KanTime we were spending more than 20 hours a month to ensure we had everything we needed to submit a pre-claim request. Now the system handles it for us!"

Pediatric
Therapy

Certified
Home
Health

Pediatric
Non-Medical

Non-Clinical
Home Care

Pediatric
Skilled
Nursing

Private Duty
Nursing

Hospice

Home
Based
Therapy

Palliative

Consumer
Directed
Services



How can KanTime help?

Review Choice Demonstration - Request for Review(s)

Location: ALL

LOB: ALL

Payer: ALL

Display

Create RCD Request

Exclude RCD Request

Client: ALL

Clinician: ALL

Client Team: ALL

Documents Verified: ALL

POC Status: ALL

F2F Status: ALL

Submission Sheet: ALL

Assessment Status: ALL

☐ Period of Care Start Date From: 05/22/2021 To: 07/22/2021










☐ Period of Care End Date From: 05/22/2021 To: 07/22/2021

☐ Show all Period of Care marked as 'RCD not required'

☐ Advanced Filter

K < > X

Showing 1 - 100 of 148 Period Of Care, Page 1 of 2

Client	Admit#	Period of Care	Payer	Assessment	Clinician	OASIS	POC	F2F	Documents Verified	Submission Sheet	RAP	
<input type="checkbox"/> 1intake, chris (1247-HH)	1236	1 - 06/03/2021 - 07/02/2021 (#1)	PALMETTO GBA	SOC 06/03/2021	Hamilton, Chris	X	X	X	X	X	X	  
<input type="checkbox"/> 1intake, chris (1247-HH)	1236	1 - 07/03/2021 - 08/01/2021 (#2)	PALMETTO GBA	SOC 06/03/2021	Hamilton, Chris	X	X	X	X	X	X	  
<input type="checkbox"/> admit, ks1 (1057)	1064	1 - 07/03/2020 - 08/01/2020 (#1)	PALMETTO GBA	SOC 07/03/2020	Spence, Kim	X	X	X	X	X	X	  

How can KanTime help?

Review Choice Demonstration - Awaiting for Review(s)

Location: ALL LOB: ALL Team: ALL Payer: ALL Client: ALL Request Status: ALL Submission Type: ALL Aging: 10 days

☐ Period of Care Start Date From: 01/24/2020 To: 03/24/2020

☐ Period of Care End Date From: 01/24/2020 To: 03/24/2020

☒ Request ID: 5,6

☐ Advanced Filter

Showing 1 - 2 of 2 Request(s), Page 1 of 1

Request ID	Client	Admit#	Period of Care	Payer	Request Status	Submitted By	Submitted On	Submission Type	Aging	Aging from Initial Submission
005	James, Vernica(1016)	1015	2 -- 03/01/2020 - 03/30/2020 (#1)	Medicare	Pending Submission			Initial		
006	James, Vernica(1016)	1015	2 -- 03/31/2020 - 04/29/2020 (#2)	Medicare	Pending Submission			Initial		

How can KanTime help?

Review Choice Demonstration - Appeal/Non Affirmed Review(s)

Location: ALL LOB: ALL Display Create RCD Request

Clinician: ALL Payer: ALL

Client: ALL Team: ALL

Documents Verified: ALL Submission Sheet: ALL Assessment Status: ALL




POC Status: ALL F2F Status: ALL

☐ Period of Care Start Date From: 01/24/2020 To: 03/24/2020

☐ Period of Care End Date From: 01/24/2020 To: 03/24/2020

☐ Advanced Filter

Showing 1 - 1 of 1 Period Of Care, Page 1 of 1





















	Client	Admit#	Period of Care	Payer	Non-Affirmed Request ID	Non-Affirmed Reason	OASIS	POC	F2F	Documents Verified	Submission Sheet	
<input type="checkbox"/>	James, Vernica (1016)	1015	2 - 03/31/2020 - 04/29/2020 (#2)	Medicare	006	Reason: no affirmed	✓	✓	✓	✗	✗	  

How can ABILITY help?

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★ Quick Links

 Patients	 Eligibility Request	 Eligibility Responses 1 Tasks	 Eligibility Batches	 ABN	
 Institutional Claims 2 Tasks	 Professional Claims 1 Tasks	 Appeals	 Audit Management	 Claim Status Responses	 Claim Status Batches
 Remit Payments 1 Tasks	 Remit Details	 Remit Analytics	 Payer Match (Dashboard)		
 File Manager	 File Dashboard	 Reports	 Payer List	 EASE Medicare	

How can ABILITY help?

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ABILITY - Home Health 1 (8)

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RCD Submission

ADR/Pre-Pay Submission

RAC/Post-Pay Submission

Discussion Period

Appeal Level 1 Submission

Appeal Level 2 Submission

Appeal Level 3 Report

Appeal Level 4 Report

Appeal Level 5 Report

Timeframe



Add RCD

Template

Status

Progress

Not Started

RCD STATUS REPORT FROM START DATE 01/28/2021 TO 07/27/2021, FOR SELECTED AGENCIES

Sort Help

1 to 25 / 30 (30) 25 1

Agency	HIC/MBI	Patient Name	Start	My Due Date	Submit	Days Pending	Decision Date	Status	UTN#	RCD Notes	CMS Status
							All	All			All
ABILITY - Home Health 1	000000812A	JANE, JOHN S	02/06/2021	02/11/2021						None	Not Sent
ABILITY - Home Health 1	000001926A	JOHN, JOHN C	02/22/2021	02/27/2021	07/11/2021	16		Not Received		None	Sent to CMS
ABILITY - Home Health 1	000003119A	JANE, JOHN C	03/13/2021	03/18/2021	07/04/2021	23		Not Received		None	Sent to CMS
ABILITY - Home Health 1	000001625A	JANE, JOHN V	03/15/2021	03/20/2021	07/23/2021	4		Not Received		None	Sent to CMS
ABILITY - Home Health 1	000001824A	JOHN, JOHN V	03/16/2021	03/21/2021	07/04/2021	23		Not Received		None	Sent to CMS

How can ABILITY help?

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2

1

8

RCD Submission

ADR/Pre-Pay Submission

RAC/Post-Pay Submission

Discussion Period

Appeal Level 1 Submission

Appeal Level 2 Submission

Appeal Level 3 Report

Appeal Level 4 Report

Appeal Level 5 Report

Timeframe ▾

Add RCD

Template

Status

Progress

Not Started

RCD PROGRESS REPORT FROM START DATE 01/28/2021 TO 07/27/2021, FOR SELECTED AGENCIES

Sort Help ⓘ

1 to 9 / 9 (30)

25 ▾

1 ▾

Agency	HIC/MBI	Patient Name	Start ▲	Submit	RCD Notes	Status	Days Pending	Submission Type	Submission Status	RCD Form	Last NA Decision	Task 1	Task 2	Task 3	Task 4	Task 5	Done
ABILITY - Home Health 1	000003119A	JANE, JOHN C	03/13/2021	07/04/2021	None	Not Received	23	Initial Submission	Submitted		NA						
ABILITY - Home Health 1	000003119A	JANE, JOHN B	05/12/2021	07/20/2021	None	Not Received	7	Resubmission	Submitted								
ABILITY - Home Health 1	000000748A	JOHN, JOHN A	05/27/2021	07/05/2021	None	Not Received	22	Resubmission	Submitted								
ABILITY - Home Health 1	000000852A	JANE, JOHN S	05/29/2021	07/04/2021	None	Partially-Affirmed	NA	Resubmission	Submitted								
ABILITY - Home Health 1	000001926A	JOHN, JOHN C	06/22/2021	07/03/2021	None	Non-Affirmed	NA	Initial Submission	Submitted		NA						
ABILITY - Home Health 1	000003119A	JANE, JOHN Q	07/11/2021	07/04/2021	None	Non-Affirmed	NA	Resubmission	Submitted								

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[Appeal Level 5 Report](#)

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RCD NOT STARTED REPORT FROM START DATE 07/27/2020 TO 07/27/2021, FOR SELECTED AGENCIES

Sort Help ⓘ 1 to 25 / 392 (392)

Agency	HIC/MBI	Patient Name	Start	S/Loc
ABILITY - Home Health 1	000000712A	JOHN, JOHN Y	07/29/2020	P B9997
ABILITY - Home Health 1	000000712A	JOHN, JOHN D	07/29/2020	P B9997
ABILITY - Home Health 1	000000712A	JOHN, JOHN B	07/29/2020	P B9997
ABILITY - Home Health 1	000000852A	JOHN, JOHN Y	08/02/2020	P B9997
ABILITY - Home Health 1	000000852A	JOHN, JOHN S	08/02/2020	P B9997
ABILITY - Home Health 1	000000852A	JOHN, JOHN K	08/02/2020	P B9997
ABILITY -				

Questions? We have answers!



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