Additional considerations about services being certified

Do you need a national accreditation or state certification?
Is the Board “on board”?
There is a cost.
What about your executive team/senior management and administration?
Things to Consider

1. Who do you serve?
2. Service delivery
3. Clinical paperwork
4. Staffing Considerations
5. Reimbursement capability
6. QI plan for ongoing compliance
7. Evaluating the Value Add
Target Populations

Who do you Serve?
What services are currently being delivered?

Type
Volume
Frequency
Location
Can the services be certified?
Assess current paperwork & forms for revisions

Location and security of client charts

Remember the “golden thread” and medical necessity
Staffing Considerations

- Expertise and skill level of staff
- Certification of staff
- Caseload size
- Supervisors
- Training & Supervision
Type of current billing & reimbursement

Keeping track of units

Who should submit the claims?
- Can Medicaid billing be incorporated?
- Should Medicaid claims submission be contracted to external vendor?
Evaluating the Value

Costs
- National accreditation
- Medicaid billing process
- Higher level staff
- QI process
- Training

Revenue
- Type of services you’ll provide
- Estimating number of units
- Estimating revenue

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