



# CharterCARE Health Partners

## Building efficient & collaborative care management workflows



### About CharterCARE Health Partners

**Location:** Providence, Rhode Island

**Solutions in use:** CarePort Care Management

**Profile:**

- Coordinated regional care network
- 2 acute care hospitals, 579 licensed beds
- Large post-acute and ambulatory network
- 55,065 emergency department (ED) visits annually
- 17,403 patient discharges annually

Effective care management is a priority at CharterCARE Health Partners. The organization’s mission is to ensure that residents of Rhode Island receive exceptional quality care at the right time, in the right setting, with the utmost compassion and efficiency.

Using CarePort Care Management, CharterCARE Health Partners has streamlined workflows to enable better collaboration between departments. These efforts have saved time, reduced denials, and improved billing to create a healthier financial future.



### Improved revenue cycle

More transparent, accessible documentation leads to faster billing and fewer denials.



### Reduced authorization errors

Average of 14-18 authorization errors per month dropped to six errors during the first month with the new workflow, saving five hours of overtime each week.



### Fewer peer-to-peer reviews

New process overcomes challenges of the authorization process, reducing the number of peer-to-peer reviews.



“CarePort Care Management helped us identify the problem, put a process in place, and helped collaboration across

the ED and behavioral health unit...

All of our departments – not just case management – use CarePort Care Management to document care, instead of using a bunch of emails, which improves tracking, collaboration, and efficiency.”

**Mary McClintock, RN, MSN, CCM**

*System Director of Case Management  
CharterCARE Health Partners*

## Overcoming authorization challenges for behavioral health patient admissions

About one out of every eight visits to EDs in the United States involves mental health and substance use disorders, and that number is growing. Health systems must have well-documented workflows between emergency care and behavioral health teams to ensure continuity of care and efficient billing.

When patients arrive at the behavioral health unit, they should have an inpatient authorization for a certain number of days. Unfortunately, these authorizations did not flow smoothly between the two departments at CharterCARE Health Partners. "It caused a lot of confusion and numerous denials," Mary McClintock said. "We could overturn the denials eventually, but we needed to find a way to prevent them from happening in the first place."

CharterCARE Health Partners developed an intervention to help the behavioral health team document and report on ED authorization issues. Then, the ED staff obtained access to CarePort Care Management, so they could easily share initial authorizations and attach related paperwork from other hospitals.

"The new process keeps everyone on the same page," McClintock said. "After just one month, behavioral health doesn't have to get the authorizations again; we can bill faster because the authorization is on-hand; and the physicians don't have to do as many peer-to-peer reviews."

Within the first month, CharterCARE Health Partners estimates the average number of authorization timeliness issues has dropped from as many as 18 per month down to six. McClintock reports she spent an average of six hours of overtime per week to resolve authorizations, but that has been cut down to about one hour. She also expects a reduced denial rate for claims.

## Efficiencies in the billing office

CarePort Care Management also helps save time for billing staff by making utilization management (UM)

notes accessible. Clinicians use these notes to document information for the business offices. These notes are interfaced with the hospital's electronic health record (EHR), Meditech.

For example, when CharterCARE Health Partners admits a Medicare patient, those inpatient admissions are payable under Part A if the clinician expects that patient to stay two midnights, also known as the "Two-Midnight Rule." Otherwise, this patient's care is payable under Medicare Part B.

"Everybody is on high alert for these cases, and we would have a round of emails between case management, medical records, and billing – even coding – asking if it was really Two-Midnight or not," McClintock said. "Now the UM note clarifies 'appropriate for inpatient' or 'bill Medicare Part B' so the communication gets to all necessary parties and we can bill in a timely manner."

Another way case managers use the UM notes to save time for the billing office is to let them know if a case is going to be appealed. When they get a denial from a payer, they scan the letter into CarePort Care Management, review the case, and indicate in the UM note whether the case will be appealed. Now, when billing receives a claim denial, they can look at the UM note to see the status, instead of emailing.

## What's next?

CharterCARE Health Partners continues to refine workflows for better collaboration and efficiency. It is currently working to streamline the denials workflow across the community. Eventually, denials will go into a financial data repository tool and populate CarePort with the information.

"One business office reports denials out of one EHR, another would use something else...and they all called the denial something different, so there hasn't been a way to measure them apples to apples," McClintock said. "The one commonality is CarePort, which will be able to bring together all these different hospitals with separate EHRs."



**Learn more!** Contact a CarePort® representative for more information.