

# Introduction to the BFCC-QIO Program

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# About Livanta LLC

- Established in 2004
- Privately-held, government contracting firm headquartered in Annapolis Junction, MD
- Livanta employs skilled professionals who specialize in:
  - Medical documentation and health care claims
  - Financial and compliance audits
  - Data analysis and management
  - Medicare medical review and appeals review programs

# About Livanta LLC

- Operations are conducted in two states
  - Annapolis Junction, Maryland
  - Las Vegas, Nevada
- Nevada Operations
  - Beneficiary and Provider Call Centers
  - Request medical records for all reviews
  - Perform record review for appeals
- Maryland Operations
  - Receive/Scan/Process medical records
  - Perform record reviews for Quality of Care/Utilization Review/Higher-Weighted DRG coding reviews
  - Short Stay Review Program

# BFCC QIOs

- **A BFCC QIO...**
  - Is the Beneficiary and Family Centered Care Quality Improvement Organization
  - Handles all discharge appeals and quality of care complaints, Higher Weighted DRG Reviews and Short Stay Reviews
  - Works in partnership with patients, providers, and practitioners across organizational, cultural, and geographic boundaries.
  - Innovates efficient, effective health care quality improvement strategies that are shared widely to lead rapid, large-scale change.
  - Supports the sustainment of healthy communities and persons through quality improvement

# QIN QIOs

- QIN QIOs will perform Quality Improvement Work
- There are a total of 14 QIN QIOs nationwide
- Atlantic Quality Innovation Network is the QIN-QIO for New York
- QIN QIOs work with providers on quality improvement such as:
  - Reducing readmissions
  - Reducing hospital-acquired infections
  - Care coordination
  - Cardiac health
  - Diabetes care
  - Medication safety

# BFCC-QIO Tasks

- Discharge Appeals
- Quality of Care Reviews
  - Beneficiary complaints
  - General quality of care
  - Referrals
- Immediate Advocacy
- Patient Advocacy

# Beneficiary Rights – Appeals

- If a beneficiary is being discharged from a health care facility such as a hospital or nursing home, they will receive a notice of discharge in writing
- The notice can be given anywhere from 4 to 48 hours before discharge
- The notice will include instructions on what to do to file an appeal, including timeframes for the appeal process (“Important Message”)

To file an **appeal**, call Livanta at 1-866-815-5440

# Beneficiary Rights – Appeals

- After a beneficiary calls, Livanta will contact the health care provider to request the medical record
- The provider will send the medical record to Livanta
- An independent physician reviewer will then look at the medical record to determine if the health care provider made the right decision in issuing the discharge notice



# Beneficiary Rights – Complaints

- If a beneficiary has a concern about the quality of care or other services they get from a Medicare provider, they may file a complaint
- Examples of complaints include:
  - A mistake in a medication
  - No information/not enough information given when discharged
  - A change in condition that was not treated
  - Hospital/facility acquired infection
  - Denial of Emergency Room treatment based on ability to pay (EMTALA)

To file a **complaint**, call Livanta at 1-866-815-5440

# Beneficiary Rights – Complaint Referrals

- **Examples of QIO Referrals**

- State of New York Referrals
  - Bad or cold food
  - Facility overall cleanliness and sanitation
  - Environmental health issues
- End-Stage Renal Disease Network Referrals/ Complaints
  - ESRD Network 2 - IPRO (New York)
- Medicare Administrative Contractor (MAC) NGS Medicare
  - Billing and Claims for Part A/B
  - Fiscal Intermediary Services for Part A, Hospitals, SNFs and Fraud
- Home Health and Hospice Billing and Claims (NGS Medicare)
- DME Billing and Claims (Noridian)

# Complaints – Getting a Decision

- The beneficiary or their legal representative, and the health care provider, will receive a decision from Livanta over the phone and in writing
- Livanta generally completes the case review within 30 - 45 days from receipt of the complaint form, although some cases may take longer
- Decision letters are designed to be easy to understand and reference “Standards of Care”

# What can caregivers do?

- Family members, caregivers, friends, or advocates can be appointed as a patient representative
- There are two ways to appoint a representative:
  - Complete an “Appointment of Representative” form found on Livanta’s website (CMS Form 1696)
  - Submit a written request with the appeal
- Livanta now accepts Congressional Release Forms in lieu of CMS 1696

# Immediate Advocacy & Patient Advocacy

Immediate Advocacy is a program whereby the beneficiary or their representative may request “real time assistance” for Medicare service issues.

- Durable Medical Equipment (DME) not delivered
- Home Health Nurse no-show
- Speak with a Clinician or Social Worker to address discharge planning
- Questions regarding appropriate admission
- Available during care and immediately after care

# Introducing Arrow

A way for you to check on your case status online.  
Simply input the case number and click Search.

## Check Your Case

Please insert your state initials, case number, and case type for up-to-the-minute status and details.  
Arrow does not apply to HWDRG cases.

Examples: [Need more help?](#)

Appeals: NJ-123456-AP (State Initials)-(Case Number)-(Case Type)  
Quality: NJ-123456-QU (State Initials)-(Case Number)-(Case Type)

Please note: Arrow is intended to supplement existing case review processes. It does not replace any processes, including phone notification of decisions. Providers should not discharge patients until they have received verbal notification of the decision from Livanta.

Case Number:

**Appeal Started**  
7/14/2015 4:21:03 PM

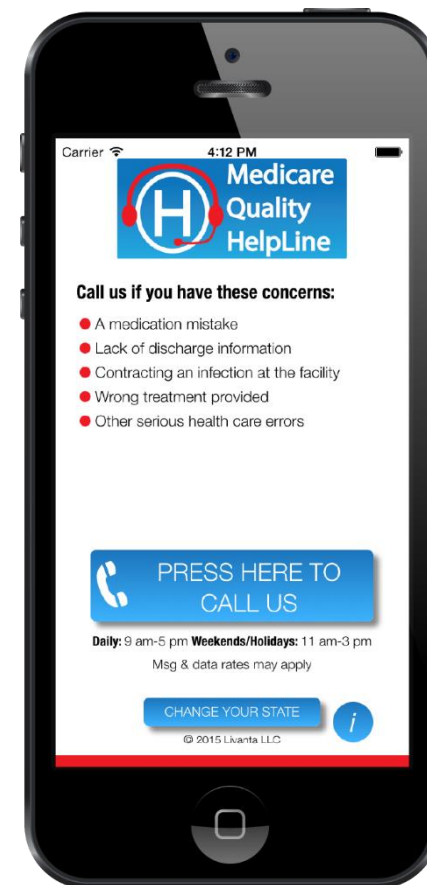
**Medical Record Received**  
7/17/2015 8:55:17 AM

# Medicare Quality HelpLine App

- Immediately accessible
- One-touch dialing
- Easy to understand
- Absolutely free app\*
- Available for download



\* Message & data rates may apply



# Contact Information

For general questions, contact:

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For clinical or case inquiries, contact:

Livanta Medicare HelpLine  
1-866-815-5440