

Legal and Financial Implications of Inadequate Clinical Documentation

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The phrase, “does not meet medical necessity” seems simple, but the implications for patients and treatment centers are profound. When you hear or see this phrase, it means that you either will not continue to be paid for the care you are providing, or that the money that you have already been paid may be recouped. Further, it may put an additional unnecessary financial burden on your patients and affect their ability to secure appropriate treatment.

When it comes to clinical documentation, proper preparation and the implementation of adequate protocols are the keys to avoiding costly mistakes. Once you receive a letter informing you of a pending insurance investigation, it's too late. A letter from an insurance company requesting recoupment for previously paid claims may seem straightforward, however, it may be a sign that your treatment facility is under investigation and could be a precursor to referral by the insurance company to law enforcement.

The goal of this seminar is to inform about what is really at stake when your clinical documentation is inadequate, and to empower you and your treatment facility to implement changes to your documentation processes now in order to avoid costly investigations in the future. This panel-style presentation is an opportunity for treatment centers to come together and learn important strategies to help them protect themselves, their patients, and their financial solvency from costly mistakes resulting from poor clinical documentation practices.

You don't know what you don't know, and what you don't know about appropriate clinical documentation could definitely hurt you, your patients, and your company. Prudent mental health and substance abuse treatment providers know that prevention is the best way to avoid unnecessary and costly documentation mistakes.