



OUT-OF-STATE MEDICAID

Out-of-State Medicaid is a complicated and foreboding component of revenue cycle that requires the right focus combined with specialized expertise to tackle the end-to-end management of the entire application and enrollment process. Every state has varying requirements for initial applications and subsequent renewals / revalidations, calling for heightened attention throughout the entire submission process.

Kemberton's team of credentialing specialists and proficient billers, coupled with our advanced technology, gives us a distinct advantage in managing and fulfilling all insurance recovery needs, while eliminating the challenges and administrative burdens being placed on already constrained resources.



COMPREHENSIVE SERVICE OFFERING FOR OUT-OF-STATE MEDICAID

We deliver an integrated solution that utilizes our 25+ years of experience and catalogued maintenance of active provider numbers to enroll facilities and physicians with Out-of-State Medicaid payers for a seamless recovery of benefits. Our team oversees all activities on behalf of the provider, including all Medicaid billing and follow-up activities. Driven by advanced technology that ensures expedited claims processing and resolution, we provide our customers and patients with an unparalleled Out-of-State Medicaid service offering and experience.

WHAT WE DO

- » Enroll Hospitals and Physicians
- » Utilize Advanced Technology
- » Bill and Collect Claims
- » Follow-Up Through Full Resolution
- » Eliminate Added Burdens on Staff

BENEFITS REALIZED

- » Increased and Expedited Cash Recovery
- » Reduced Uncompensated Care and Bad Debt
- » Decreased Denials
- » Secured Additional DSH Days
- » Removed Administrative Barriers Delaying Care

THE KEMBERTON DIFFERENCE

Contact us today to learn more about our proven process for managing Out-of-State Medicaid applications and securing timely approvals



Credentialing experts knowledgeable in all states and of the ever-changing processes and submission requirements



Advanced technology to maximize efficiencies and streamline the process for Hospitals and Physicians



Providers are enrolled quickly and claims are billed timely to avoid costly delays in reimbursement