



CONTINUUM
HEALTHCARE CONSULTING

The Denial Didn't Start With The Denial

It Started With Documentation

The medical record should clearly
answer:

Why this level of care?

Why now?

Why continued stay?

Why discharge wasn't appropriate



The Story Didn't Match

The reviewer cannot see the same story.

- Nursing says one thing
- Therapy says another
- Physician documentation lacks specificity
- Case management documentation doesn't align

Medical Necessity Wasn't Clear

Everyone may know the patient
needs care.

The chart has to prove it.

Questions reviewers ask:

Could this patient have been
treated elsewhere?

Was continued stay justified?

Was this level of care necessary?

Missing Pieces Matter

Examples:

Late physician documentation

Missing assessments

Incomplete care plans

Missing updates

Unaddressed barriers to discharge

Small gaps can create large vulnerabilities.

The Appeal Is Already Behind

Appeals become difficult when:

The documentation is incomplete

The story is inconsistent

Medical necessity isn't supported

Important details were never
documented

You can't appeal information that
isn't in the record.

CHC Audit & Appeal Support

We help organizations:

Review denials

Identify documentation vulnerabilities

Develop and support appeals

Strengthen medical necessity
documentation

Reduce future audit risk

*The strongest appeals begin before
the denial arrives.*

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