Lionstone Healthcare Enhances Reimbursement Accuracy and Efficiency with MedaSync's Al-Powered Platform

In the first 4 months with MedaSync, Lionstone Healthcare uncovered hundreds of additional reimbursement opportunities resulting in:

Medicaid

+0.92

Increase in average CMI rate

Medicare

+\$72/day

Increase by uncovering IPA opportunities

Medicare Advantage

+\$139/day

Increase from care level alignment

QIP

100%

visibility in Quality Incentive risk **Efficiency**

680

in chart reviews

Lionstone Healthcare Background

Lionstone Healthcare provides corporate healthcare support consulting and advisory services to skilled nursing organizations in Ohio that serve more than 3,700 residents. The organization is built on a dual mission: delivering high-quality care to residents while creating a culture of respect and support for staff.

As CEO Adam Cusner explains, "Across the board, what we're trying to provide is the highest quality clinical care possible to residents. The second is to provide employees with a high degree of respect, recognizing that they are our conduit to providing that clinical care."

Working with 40 facilities in one of the most competitive and financially pressured skilled nursing markets in the country, Lionstone needed tools that would help balance its commitment to quality care with financial sustainability.

Lionstone Healthcare Goals

A shift in Ohio's Medicaid payment model and increasing Medicare and Medicare Advantage reimbursement complexity prompted Lionstone leadership to set clear goals:

- Improve reimbursement accuracy under multiple payer systems.
- Capture subtle changes in resident conditions that directly impact Case Mix Index (CMI).
- Protect Quality Incentive Program (QIP) performance.
- Reduce manual burden on regional reimbursement leaders.
- Gain predictive visibility across the portfolio to guide operational decisions.



"MedaSync is one of the best decisions we've made. It ensures we capture every dollar for the care we're already providing, and it empowers the team to focus on what matters most — delivering quality care to residents."

– Adam Cusner, CEO



Lionstone Healthcare Challenges

1. Manual, Time-Consuming Audits

Regional leaders spent two hours per day manually combing through charts. With five to seven buildings each, the workload was unsustainable, leaving little time for proactive coaching or resident-focused tasks.

2. Missed Subtle Clinical Changes

Reimbursement complexity caused important but easily overlooked details to be routinely missed. These gaps reduced CMI accuracy and left reimbursement opportunities uncaptured.

3. Balancing QIP and CMI

Staff had difficulty weighing whether capturing higher CMI would risk a QIP penalty. The process required lengthy manual reviews of nursing notes and documentation.

The Results

MedaSync has delivered measurable financial impact, greater efficiency, and enhanced compliance for Lionstone while supporting its mission to provide high-quality care:

- **Efficiency Gains:** Regional reimbursement leaders reclaimed over an hour daily per building, totaling more than 680 hours saved in chart reviews across the portfolio.
- Financial Uplift and QIP Protection: MedaSync helped Lionstone capture new revenue opportunities while maintaining QIP performance
 - Medicaid: +0.92 increase in average CMI rate
 - Medicare: +\$72/day increase by uncovering IPA opportunities
 - Medicare Advantage: +\$139/day increase from care level alignment
 - QIP: 100% visibility into risk factors before they potentially trigger penalties.
- Improved Compliance: By automating documentation and audit preparation, MedaSync reduced anxiety during reviews. 'MedaSync gives us confidence that we've captured everything correctly. We walk into audits with peace of mind,' said Chelsea Lowe, VP of Clinical Reimbursement.
- Staff Retention & Recruitment: MedaSync became a differentiator in hiring and retaining talent, demonstrating Lionstone's investment in making reimbursement roles more manageable and rewarding.
- **Strategic Leverage:** Data now supports payer negotiations, strengthening Lionstone's market position.

4. Delayed Visibility into Trends

Leadership only gained clarity after reimbursement cycles closed. This reactive approach left facilities vulnerable to missed opportunities and prevented timely intervention.

5. Confusion with Multiple Payer Rules

Facility staff often didn't know whether a resident's plan followed PDPM or level-based reimbursement. This created confusion, errors, and frequent reliance on billing or intake teams.

The Solution

Lionstone Care adopted MedaSync in early 2025, rolling out the platform across the facilities it serves in a phased implementation. The platform provided targeted solutions to each challenge:

- Automated Audits: Reduced review time from hours to just 15 minutes per day across an entire regional portfolio.
- **AI-Driven Alerts:** Captured subtle clinical changes automatically, ensuring accurate CMI coding.
- Two-Click QIP vs. CMI Review: Simplified complex trade-off decisions by instantly showing the financial and quality impact of coding changes.
- Real-Time Predictive Analytics: Gave leadership proactive visibility, allowing them to focus resources on the highest-risk facilities before deadlines.
- Unified Payer Dashboard: Consolidated Medicare, Medicaid, and Medicare Advantage into one system, eliminating confusion and providing clarity for facility staff.

"MedaSync bridges clinical reimbursement with operations and gives us a predictive view we never had before."

Adam Cusner, CEO

