

# Navigating Medicaid Changes: Strategies for Providers



# Facing Medicaid Pressure: A Turning Point for Multisite Providers

With Congress posed to pass a budget bill that reduces federal Medicaid funding, introduces work requirements, and limits supplemental state payments, multisite healthcare providers that rely heavily on Medicaid must prepare for the impact of these changes. Margins are already thin, and the fallout from patient coverage losses and reimbursement could destabilize operations.

## Strategic Considerations Before Reacting

## **Reevaluate Payer Mix:**

Providers should reassess their payer portfolios by location. High-Medicaid sites may require operational adjustments or renegotiated payer contracts.

## Service Line Optimization:

Identify which services are most exposed to Medicaid and explore whether to scale, restructure, or co-locate services with stronger reimbursement models.

#### Workforce Planning:

Delayed payments and patient churn will place stress on staffing models. Flexibility and productivity tools become essential.

#### **Scenario Modeling:**

Build cash flow models under reduced reimbursement assumptions to identify trigger points for intervention.

#### Advocacy and Policy Monitoring:

Engage state Medicaid agencies and associations early to understand how federal changes will be implemented locally.



## RCM and AI: Levers for Resilience

Traditional revenue cycle models—heavy on manual effort, BPO dependencies, or fragmented tech —struggle in cost-constrained environments. For Medicaid-heavy providers, stalled cash flow means delayed payroll, limited expansion, and increased financial risk. This is where AI-driven RCM becomes a differentiator.

Al agents can take on high-volume, error-prone RCM processes that are especially vulnerable during periods of funding disruption. From automating insurance verification to accelerating denial resolution, these agents reduce cycle time, improve accuracy, and operate 24/7 without expanding headcount. Tally's human-in-the-loop Al model ensures expert oversight, so automation doesn't come at the cost of compliance or nuance.

## Acting Before Crisis: Finding Gains in Slowdowns

Providers don't need to wait for financial distress to modernize. All agents can be phased in process by process—starting with verification, prior auth, or payment posting—without a full overhaul. This modular approach reduces risk and allows teams to redeploy staff from tactical to strategic work.

In a Medicaid-constrained future, resilience will favor organizations that automate early, manage lean, and stay focused on financial agility. Tally is here to help multisite providers take control before the budget impact becomes a bottom-line crisis.

Learn more about finding efficiencies in your billing.