



Large Claim Audits & Negotiations

High dollar claims average between 50% and 80% of your plans overall claims costs. Health West's team has been negotiating High Dollar Claims with hospitals, surgical centers and providers for over 20 years. We average 30% to 60% in hard dollar savings on these claims. We will work with you to set the dollar amount for audit and negotiation.



Catastrophic illnesses produce catastrophic claims, which are a major threat to any health plan. Our unique negotiating skills, medical knowledge and proprietary strategy mean big savings for your plan.

It is estimated that hospital billing errors result in overcharges of 26 percent. We are a leader in auditing and negotiating large and complex medical claims. Our specialty is claims exceeding \$10,000.

We start with a detailed audit, look at pricing options and if warranted start our negotiation process.

Deep Discounts

Receive an average of 50% or better on out-of-network healthcare claims.

100% Provider Sign-off

We secure provider sign-off on 100% of negotiated claims to avoid post-negotiation disputes, in addition to producing lower healthcare costs.

\$30 Billion in Paid Claim Data

Our database has over \$30 billion in paid healthcare claims data, including typical reimbursements from national regional and local payors as well as Medicare, to help lower healthcare costs.

Advanced Benchmarking Analytics

Our proprietary database uses our Decision Data to determine what you should be paying for services rendered. This is where we negotiate from—not the billed charges in order to lower your healthcare costs.

20+ Years in Claims Negotiations

Our negotiators have more than 20 combined years in negotiation experience, including building provider networks and out-of-network fee negotiation.

Audit Summary

Patient Name:

Date of Birth/Age: **24**

Dates of Service Audited: **January 1, 2016 – December 31, 2016**

Total Billed: **\$198,462.36**

Total Paid: **\$95,965.46**

This member's claims appear to be from an auto accident involving the use of alcohol and/or other substances. According to the plan document, the plan is not to pay for this type of claim. In discussing with UMR, they indicated that according to the Mental Health Parity Act, because this was an attempted suicide, it is a protected class of claim and cannot be denied. Our research and 30+ years in the health insurance market does not support this. When asked to clarify which part of the Mental Health Parity Act they were quoting from we never received a decision. It is our opinion that the fiduciary duties of Stampin' Up! are to not pay for claims that the plan does not owe.

We also have a private detective who found that this member has several warrants out for the exact same types of incidents.

<u>Claim ID Number</u>	<u>Details</u>
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All Claims for this service should be denied.

Plan Savings: \$95,965.46

Audit Summary

Patient Name:
 Date of Birth/Age: **8**
 Dates of Service Audited: **January 1, 2016 – December 31, 2016**
 Total Billed: **\$193,832.71**
 Total Paid: **\$84,930.31**

This member was transported by air ambulance, the air ambulance claim is in question, and usually a plan will pay for transportation to the nearest hospital facility. The closest facility was Dixie Regional Medical Center. However, the closest children’s hospital was Sunrise Children’s Hospital in Las Vegas which is only 200 miles from Kanab. The member was flown to Primary Children’s. Should review medical necessity of air ambulance. The patient was stable and only spent two days inpatient at PCMC for observation and IV therapy. This is usually not a life or limb threatening disorder.

The plan document states:
“Air ambulance will only be paid if your condition is such that ground transportation by ambulance, in whole or in part, is not appropriate.”

<u>Claim ID Number</u>	<u>Details</u>
16132395522	Billed: \$89,035.00 Allowed: \$75,679.75 Paid: \$74,557.82 Ground transportation charges \$31.63 per mile—savings of \$74,557.82 to PMPC

Plan Savings: \$74,557.82

Audit Summary

Patient Name: Brent Jones

Date of Birth/Age:

Dates of Service Audited:

Total Billed:

Total Paid:

Claim ID Number

Details

Plan Savings: \$

Audit Summary

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 Date of Birth/Age: **8**
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