

Medical Underpayments Review & Recapture Program



Our Recovery System consists of a team of payer contract experts and the most advanced forensic audit software system in the healthcare space. Our audit analyzes every remittance received in a 12-to-24-month period to determine contractual compliance of each reimbursement. Our team then works with the payers to recover underpayments that are due our clients.

Critical Addition to Your Revenue Cycle Management

Our underpayment recovery service is a risk-free addition to your Revenue Cycle Management (RCM) efforts. Our forensic audit is performed on remittances AFTER all other RCM efforts have been completed including other internal or external underpayment recovery efforts. We only engage remittance files that our clients expect no further revenues. Therefore, our services compliment all other RCM efforts and provides new revenues...100% of the time.

100% Success Rate

Our results are unrivaled. To date we have analyzed billions of dollars in reimbursements and remittances against 1,000s of unique and often complex payer contracts and have found noncompliance and underpayments for 100% of our clients. The typical result is 10%-20% of gross payer receipts in recovery.

Risk Free Engagement

We work solely on a contingency basis. There are no upfront fees, costs, ongoing tasks required from our clients. We take on 100% of the risk and effort to recovery revenues for our clients. We are only compensated when we successfully recover underpayments.

PROVEN PROCESS

Our team of contract specialists reviews each payer contract in detail and loads the contract payment rates and specific terms into our software system.

We also work with the healthcare provider's billing Department and claim clearinghouse to electronically upload your ANSI ASC X12 837/835 files using our Health Insurance Portability and Accountability Act of 1996 (HIPAA) compliant, proprietary encryption platform.

Our software development team then writes custom algorithms specific to the client's contract rates and terms to perform the forensic analysis.

Our team of experts and software logic identifies and reviews the variances in the actual reimbursement versus the payer's contractual obligation.

As the healthcare providers partner, we will work closely with their staff to strategize and devise a plan to proceed with recovering revenue lost due to underpaid, suspended and incorrectly denied claims.

SUPERIOR RESULTS

We have analyzed billions of dollars in reimbursements and remittances against 1,000s of unique and often complex commercial contracts and have found noncompliance and underpayments for 100% of our clients. The typical result is 10%-20% of collections from payers.

Sample Case Studies:

- **123-bed Texas hospital: \$6 million in underpayments through BCBS alone.**
- **142-bed Louisiana hospital: \$10 million+ in underpayments for top 4 payors.**
- **Large Pennsylvania Private Hospital: \$1.2 million in underpayments from their 4th largest payer. Represents 18% of their collections for the payer.**
- **A hospital network: \$30 million in underpayments from just three facilities.**
- **A large Ohio physician group: \$7 million in underpayments in BCBS professional alone.**
- **A Tennessee clinic: \$1 to \$1.5 million in underpayments per payer contract**
- **Small Texas Community Hospital: \$4,048,555.44 in underpayments from BCBS alone.**
- **A Missouri hospital: Over \$20 million in underpayments**

PERFORMANCE BASED EXPERTISE

Forensic analysis to determine contractual compliance and recover underpayments for our clients is our primary corporate expertise. We are the only provider in this space with this sole corporate mission. Given we are undiluted with other pursuits, our results are demonstrably superior to others who offer similar services as an ancillary. Furthermore, we operate on a performance only basis in that we are paid a fraction of what our clients actually receive in underpayment recovery.

We will review every payment over the past two years to verify that they were paid in full according to the payer agreements.

Our team of experienced contract specialists will analyze, load, and verify that all contract details have been entered correctly into the platform.

Once your Electronic Claims are uploaded to the platform, we will provide the following details:

- Any claim setup issues.
- Breakdown of Underpayments by Payer according to Claim Adjustment Reasoning.
- Group all Underpayments by collectability.
- Begin collections on past underpaid claims.
- Our goal is to initiate collections within ten days of receiving all relevant information.

Book your call today