



# Pre-Payment Services

UCR Facility Repricing Services

Inpatient Facility Bill Repricing

Outpatient Facility Bill Repricing

Professional Negotiation Services



# Viant Pre-Payment Services

## Pre-Payment Bill Management Services

Whether due to emergent care, provider preference or geographical limitations, health insurance plan members engage out-of-network care at a rate of \$60 billion in claims annually. As a result, national and regional payers have exposure of 10% to 15% of their total paid claims volume at the more expensive, out-of-network rate. Viant's claims costs management solutions help its clients maintain a competitive edge while minimizing the "leakage" associated with out-of-network claims.

## Capabilities

Viant offers customers the ability to address claims before payment is made with its Pre-Payment Services offering that includes UCR Facility Repricing Services and Professional Negotiation Services. These offerings combine technology-driven automation with human intervention to deliver claims cost management with industry-leading results. A proactive 'Patient Advocacy' process also defuses potential balance billing of the member.

## UCR Facility Repricing Services

After a claim is submitted but before it is paid, Viant 'reprices' the claim to the usual and customary value. Using the provider's own cost data, all inpatient facility and outpatient bills are reviewed using a three-tiered methodology at the revenue code level. Each supports a payer's benefit plan language which states that medically necessary goods and services consumed will be paid at the lesser of the usual, customary or reasonable charge:

- **Usual** – the amount that a provider routinely charges for goods and services
- **Customary** – the amount charged by similar or like providers for equivalent goods or services within a geographic area
- **Reasonable** – the amount that a prudent or independent person would consider to be realistic

Inpatient Facility Bill Repricing uses a proprietary cost-to-charge repricing methodology to provide an effective and defensible cost containment vehicle to achieve significant savings for our payer clients on inpatient facility claims.

- Uses the national standard cost-accounting method for hospitals to calculate reasonable and appropriate reimbursement
- Methodology allows a payer to negotiate up from cost, instead of down from billed charges
- Enables payers to reprice in-network facility claims prior to the application of contract terms

Outpatient Facility Bill Repricing provides reasonable and prevailing charge allowances for all procedures performed in an outpatient setting.

- Uses a three-tiered methodology to evaluate outpatient bills
- Ensures consistent and defensible repricing of outpatient facility charges
- Can reprice charges at each payer's pre-determined percentile on a local or national level

For payers looking for strong savings performance on inpatient and outpatient facility bills, UCR Facility Repricing is the solution of choice:

- Most aggressive pre-payment cost control option, with strong savings performance
- Average success rates range from 76% to 82%
- Average discount rates range from 23% to 36% depending on service mix
- Average dollar savings equates to approximately \$6,200 per claim for inpatient claims and approximately \$1,500 for outpatient claims

### Value Proposition

- Most aggressive pre-payment cost control option, with strong savings performance
- Proactive 'Patient Advocacy' communication to defuse potential balance billing
- Flexible: repricing parameters can be customized to match client benefit specifications and policy language
- All Viant repricing methods are quantitative, objective, applied consistently and defensible

## Value Proposition

- Decreased medical costs associated with out-of-network claims
- Strong savings performance across all bill types
- Success rates up to 60% on specialty claims
- Low provider appeals - signed agreement on each negotiated claim
- No balance-billing of members

## Professional Negotiation Services

Viant's Professional Negotiation Services employs trained negotiators who analyze multiple data sets to determine the most appropriate and reasonable fee basis for a procedure and then use that information to negotiate directly with specific providers. A mutually agreed upon price between the provider and the negotiator is confirmed by return of a signed agreement to Viant.

- Viant initiates the negotiation by extending a payment offer to the provider
- All settlements include provider sign-offs or written documentation, resulting in no balance-billing to patients
- Viant's negotiators have provider or health insurance industry backgrounds
- Can be used for out-of-network, inpatient, outpatient, physician, IV therapy and other healthcare services

For those claims not eligible for savings through network access or repricing programs, Professional Negotiation Services is an equally powerful cost-saving option:

- Strong savings performance across the full spectrum of bill types, including small bill claims
- Discounts of up to 23% on inpatient claims
- Good entry point for pre-payment cost control solution
- Product can be used in conjunction with Viant's overall solutions

## Summary

As out-of-network charges have become increasingly unavoidable, Viant's Pre-Payment Bill Management Services helps mitigate payers' exposure to costs associated with these claims. Through its UCR Facility Repricing Services and Professional Negotiation Services, Viant delivers its customers effective cost claims management, resulting in substantial savings on out-of-network claims.

To learn more about Viant's Pre-Payment Bill Management Services, call us today at 800.820.5824.

## PNS, UCR Case Study

### Client Profile

A publicly traded health and supplemental benefits company

### Situation

This benefits solutions company offers a wide array of health and supplementary benefit plans for its 11.4 million members, comprising employer groups, government programs and individuals. The company delivers nationwide access to healthcare providers through its proprietary PPO network.

Even with a robust proprietary network in place, around 10% of the company's healthcare claims were out-of-network. The company sought a solution for those claims not eligible for savings through network access or re-pricing programs.

### Viant Services Utilized

Professional Negotiation Services

UCR Facility Repricing

Viant Supplemental Networks

### Results

| <b>PNS</b>            | <b>2006</b>   | <b>2007</b>   |
|-----------------------|---------------|---------------|
| <b>Claims</b>         | 72,570        | 189,233       |
| <b>Billed Charges</b> | \$188,966,415 | \$238,062,386 |
| <b>Savings</b>        | 22%           | 23%           |
| <b>UCR</b>            | <b>2006</b>   | <b>2007</b>   |
| <b>Claims</b>         | 9,077         | 5,966         |
| <b>Billed Charges</b> | \$37,678,283  | \$19,879,673  |
| <b>Savings</b>        | 32%           | 35%           |

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