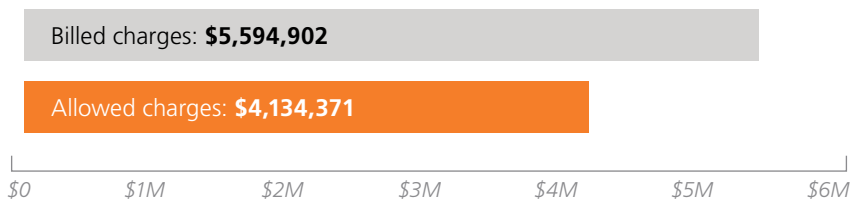


Itemized Bill Review (IBR)

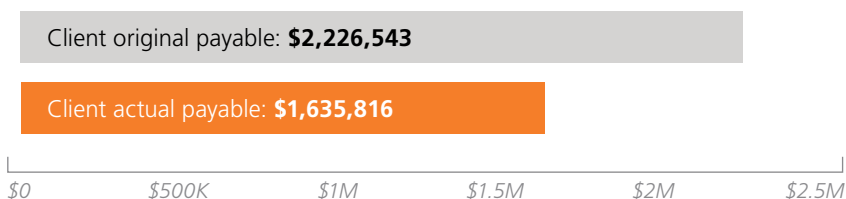
Diagnosis-related group (DRG) outlier

For a Blues plan, Optum clinical staff found dosages for the identified pharmaceutical far exceeding the recommended maintenance dose for a neonate. By adjusting the charges to account for the dosage that can safely and effectively be given to a patient in a treatment day, and identifying other errors and deficiencies on the claim, Optum was able to reduce the billed charges on the claim by nearly \$1.5 million. This resulted in savings to our client of almost \$600,000 in reimbursement costs.

Impact of Optum IBR



Client savings **\$590,727 / 26.53%**



The bulk of adjustments resulted from pharmacy dosing billing errors:

- **SODIUM PHENYLACETATE 10% — SODIUM BENZOATE 10% 50 ML VIAL \$1,619,730.56** — Pharmacy dosing billing error — One 50 ml vial per day is adequate for the recommended maintenance dose. Approximately 6.975 ml vials were billed more than once on some DOS at over \$200K each; these excess vials were denied.
- **POC Labs \$28,276** — POC monitoring unbundled from room and board charges.
- **OR Complexity 1, 2 Base Rate \$5,166** — Routine services unbundled from the OR.

Our targeted clinical and financial review leverages Centers for Medicare and Medicaid Services (CMS) and clean-claim evaluation to review inpatient facility claims

High-dollar inpatient claims are complex and frequently have billing errors. These claims are often paid under percent-of-charge reimbursement contracts and, as a result, billing errors can be costly. If not addressed, these billing errors can result in inaccurate payments, including significant overpayments.

Itemized Bill Review from Optum delivers a thorough review of an itemized bill. Our combination of vast data resources and human intelligence helps organizations identify defects and billing errors that may result (directly or indirectly) in unnecessary costs. After billing adjustments have been identified, our resolution team of negotiators and medical professionals work with providers to explain the findings and come to an equitable resolution. An end-to-end solution, Itemized Bill Review helps health plans drive payment efficiency by focusing on cost avoidance.

We support our findings with CMS provider reimbursement guidelines and plan benefit details. And our team of resolution experts work every claim to resolution with the provider. By working in concert with our clients' provider relations team, Optum minimizes provider abrasion while leveraging and defending findings.



"This has been a tremendous partnership."

– Senior director from Blue Plan

Drive payment efficiency with Itemized Bill Review.

Email: empower@optum.com

Phone: 1-800-765-6807

Visit: optum.com



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