MYBENEFIT ADVISOR

Employee Claim Assistance Recoups \$25,000

A long-time group benefits customer with 65 employees located in Cherry Hill, New Jersey.

Key Challenges

During one of our regular visits with this client, the owner mentioned that the human resource staff was spending considerable time working with a few employees on balance billing problems they were experiencing after claims were submitted to the medical insurance carrier.

MBA Solution Presented

Instead of leaving it to the HR team, we asked that any employee with a balance bill issue send the supporting documentation to our MBA claims team via secure email. Our experienced staff members would assist the employee in attempting to resolve the claim issue. With a knowledge that many balance billing issues could be the fault of incorrect billing codes or faulty processing on part of the insurance carrier, our team reviewed all information relating to the claims in question, seeking any possible correctable causes.

Measureable Results

After the analysis, our team reported that some of them were submitted and processed correctly and the patient would be responsible for paying the balance bill. There were, however, many balance bills that were based on either erroneous diagnosis codes or other faulty processing errors. Our staff members worked with the providers and carriers to have the mistakes corrected and the claims reprocessed.

Furthermore, in an effort to eliminate the same issues from reoccurring, our staff put together and had the employer distribute a communication piece specifically designed for assisting individuals on how to resolve balance billing issues. Our piece contained instructions on what an employee should look for and the process for a quick resolution. We remain available, however, should any employer require assistance.



For the 15 employees whose claims we reviewed, correcting the processing errors produced a savings of over \$25,000 in out-of-pocket costs.