



Medical Bill Review

WellComp's rigorous bill review process combines advanced technology with the expertise of our seasoned audit and clinical staff to ensure correct payments, quick turn-around and maximum savings for our clients.

SOPHISTICATED REVIEW, ACCURATE RESULTS

The opportunity to find and manage savings on medical bills is enormous. Coding errors, unbundling and up-coding, duplicate or excessive charges, treatment not related to the injury, failure to apply negotiated discounts...all drive up the cost of a claim. But there's no one simple way to find the range of errors that can occur on medical bills.

Our staff of professional analyst and nurses, combined with our sophisticated rules based technology, and proven process ensures that our customers only pay what they are responsible for. In today's complex medical billing environment, the need for medical coding and clinical expertise and sophisticated technology is more important than ever.

That is why our dedicated staff of professionals has extensive experience and maintains certifications in medical coding, and our technology utilizes an advanced rules engine to apply a re-pricing matrix that includes fee schedules, UCR, state rules, AMA coding edits, ODG / ICD-9 validation, utilization review decisions, and identifies billing discrepancies that require professional and/or clinical review.

Identifying and applying the appropriate level of review for complex bills, including surgical, hospital, trauma, and ambulatory surgical center bills can cost payers thousands of dollars in overpayments.

WellComp's process ensures these high dollars bills are subject to professional and clinical review for medical appropriateness, relatedness, supporting medical documentation, DRG validation, reasonableness of charges, and that trauma bills meet trauma requirements. By applying our proven process and technology, WellComp's has delivered significant savings to our customers.

The thoroughness of our review in no way affects the efficiency of our bill review process. Fast payment for proper approved charges supports our goal of facilitating the best possible outcome for both the injured worker and the claim.

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CUSTOM REQUIREMENTS, TAILORED SOLUTIONS

WellComp believes every customer is unique and has unique needs. We build programs around our customer's needs to maximize savings opportunities and deliver efficiencies to our customer that allow them to maximize their time to focus on claims management.

WellComp can customize the workflow to meet our customer's needs by leveraging our sophisticated rules engine.

Rules can be established at multiple levels including by:

- **Official Disability Guidelines (ODG).** Automatically review, approve, or reject charges compared to ODG guidelines.
- **Bill Type.** Can be set to ensure that specified categories of bills receive a higher level of audit, such as inpatient hospital bills
- **Line of Business.** Allows for audit reductions based on multiple types of payors
- **State.** Allows WellComp to take advantage of jurisdictional reimbursement rules, such as requirements for preauthorization and maximum physical therapy levels
- **Claim, Claimant and Client.** These individual flags are beneficial for specialized audits
- **Provider (Individual or Group).** Specific providers can be flagged for individual client reviews
- **Diagnosis Code, Service Code (CPT).** Specified codes can be flagged in the system, including a single code or range of codes, and the span of days within which specific occurrences appear
- **Per Bill And Per Claim Maximum.** Maximum thresholds on specified claims or bills can be set to trigger customized review processes
- **Dates of Service.** The minimum and maximum dates of service can also be used to trigger reviews

PPO NETWORK REPRICING

WellComp works with our clients to identify the best PPO network partners for their claims and work with them to optimize savings. Our "best in class" network strategy means our clients have access to more than 700,00 providers throughout the United States in our proprietary network as well as other national, regional and specialty networks.

In addition to the savings we bring to our clients by applying PPO contract discounts from national PPO network providers, we negotiate discounts with all our networks. And all network discounts are applied after the bill is audited to the proper amount to ensure accurate savings.

OUT OF NETWORK NEGOTIATIONS

In addition to the savings we bring to our clients by applying PPO contract discounts from national PPO network providers, for non-network providers, we will negotiate single case and long term care agreements directly with the medical provider to ensure that our customers pay a fair and reasonable rate, thereby maximizing savings.

WellComp's professional negotiators average 5 years of experience and have extensive knowledge of state laws, and rules and regulations. We secure a sign off on all negotiations ensuring reconsiderations never occur.

EBILL OPTIONS

More and more jurisdictions are adopting eBilling requirements, and our national eBill solution offers providers an established, cost-effective and convenient way to submit medical bills electronically. All eBills are verified to ensure they meet minimum bill requirements and proper acknowledgements are sent to the submitter. And, of course, there are no set-up or system enhancement fees.

ONLINE ADJUSTER BILL APPROVAL

Because the whole point of medical bill review is to help clients manage the cost of claims, WellComp offers online access for adjusters to view and release audited medical bills prior to finalization.

With the system, adjusters can:

- View the medical bill, documentation and audit recommendation
- Choose from options to: submit comments to WellComp for needed changes to the bill, release the bill for finalization, or pend the bill for later action
- View bill summary and line item detail
- Search bill history and bill images
- View treatment calendar
- PPO search integrated with Google Maps
- Access to robust reporting
- Transfer bills to other users

