



Integrated Repricing Network

# Minimize the Cost of Out- of-Network Claims



# Navigate the New Landscape of Change

As more and more providers choose network independence, payers are struggling to contain the cost of out-of-network (OON) care. In fact, approximately 12% of all commercial claims are paid out of network<sup>1</sup>, costing payers an estimated \$400 billion annually<sup>2</sup>.

When claims are incurred outside of the preferred provider organization (PPO) network service area, payers need a way to reduce liability and minimize risk.

Our Integrated Repricing Network solution suite is designed to reduce payer liability on OON claims through a single point of connectivity for comprehensive claims repricing. We help health plans and Third-Party Administrators (TPAs) maximize savings and mitigate egregious billing through cost-effective claims routing.

## Save More with Independent, Complementary Services

Since 2002, our repricing solutions have saved clients more than \$4.1 billion.<sup>3</sup> The Integrated Repricing Network solution suite includes three products which can be used independently or together:

- AccessPlus Network
- Fee Negotiations Service
- Reference-Based Pricing

In 2017, clients using all three solutions averaged a 2-4% reduction in annual OON claims cost.<sup>4</sup>

## Gain Network Discounts with AccessPlus Network

Our AccessPlus Network (APN) provides a single point of access to nearly 100 national and regional networks<sup>5</sup> for claims repricing, offering high-value network discounts. Our APN can serve as your primary or supplemental solution for OON cost containment.

The APN includes more than 45 directly contracted network partners, providing access to more than 2 million providers nationwide.<sup>6</sup> The service operates in near real time, using a single connection to quickly process claims. In fact, the vast majority of claims are returned to clients in less than 24 hours.<sup>7</sup>

Claims are indexed against government fee schedule thresholds. Typically, fewer than 1% of claims are appealed.<sup>8</sup> For those that are, APN provides appeal support within five to seven business days.

<sup>1</sup> Center for Policy and Research. "Charges Billed by Out-of-Network Providers: Implications for Affordability." AHIP, September, 2015. Retrieved from: <https://www.ahip.org/charges-billed-by-out-of-network-providers-implications-for-affordability/>

<sup>2</sup> Centers for Medicare & Medicaid Services. "National Health Expenditures: 2016 Highlights." [www.cms.gov](http://www.cms.gov).

<sup>3</sup> TC3 Health, Inc., began providing out-of-network services in 2002.

<sup>4</sup> Internal Change Healthcare data. Individual results may vary.

<sup>5</sup> Change Healthcare network connections as of April 19, 2018.

<sup>6</sup> Change Healthcare's direct network partners and provider volume, as of April 16, 2018.

<sup>7</sup> Change Healthcare processes and returns 90% of all APN claims to clients within 24 hours.

<sup>8</sup> CHC appeal rate as of April 2018

# Reduce Annual OON Claims Cost By An Average 2-4% With Our Integrated Repricing Solution<sup>9</sup>

## Achieve Sign-off for Fee Negotiations

When PPO discounts are insufficient or unavailable, Change Healthcare can negotiate reduced payment agreements. Our Fee Negotiations Service is available as either an add-on or stand-alone solution.

To maximize savings, your organization can choose billed charge thresholds to simplify claim routing. Change Healthcare begins the negotiation process by contacting the provider directly. We obtain the provider's sign-off on negotiated discounts in less than ten business days, reducing the likelihood that the claim's balance will be billed to the member -- minimizing provider discontent.

## Make Payments Reasonable with Reference-Based Pricing

Our Reference-Based Pricing solution offers claim repricing and negotiation for high-dollar claims that have traditionally been paid at 100% of billed charges, such as ER claims.

Clients can customize threshold levels at a certain percentage of government fee schedules to obtain deep discounts. This solution provides a fair payment to providers while addressing excessive billing practices, resulting in reasonable payment levels with minimal member balance billing.

In 2017, our clients achieved:

- 33% savings per claim with AccessPlus Network
- 40% savings per claim with Fee Negotiations
- 30% savings per claim with Reference-Based Repricing<sup>10</sup>

## Combat Egregious Billing

We offer various approaches to address egregious billing practices.

1. **Reference-Based Pricing approach:** All claims are repriced using the government fee schedules.
2. **Blended approach:** Savings are negotiated and secured from a Reference-Based approach
3. **Whitespace approach:** Claims incurred by members outside the payer's primary networks are subject to review after APN and fee negotiations.

## Integrated Repricing Network Solutions

AccessPlus Network (APN)

Single point of access for out-of-network claims to nearly 100 PPO Networks

Fee Negotiations

Negotiate reduced payment agreements where PPO discounts are inadequate or not available

Reference-Based Pricing (RBP)

Claims are automatically repriced or negotiated using government fee schedules

<sup>9</sup> Internal Change Healthcare data. Individual results may vary.

<sup>10</sup> Average respective savings for clients using AccessPlus Network, Fee Negotiation, and Reference-Based Repricing for 2017.



### About Change Healthcare

Change Healthcare is inspiring a better healthcare system. Working alongside our customers and partners, we leverage our software and analytics, network solutions and technology-enabled services to help them improve efficiency, reduce costs, increase cash flow, and more effectively manage complex workflows. Together, we are accelerating the journey toward improved lives and healthier communities.

