



Navigating claims
complexities with
the right cost
management partner





Blues plans, like all healthcare industry players, are seeing an urgent need to manage costs. They are seeking opportunities for success as they face the challenges of navigating evolving regulations and complex stakeholder relationships.

To get the most out of a cost management solution, payers need to know what to look for. The best fit is a cost management partner that understands how to increase value across the healthcare continuum and provide more support than just managing costs.

Here are three considerations to help Blues plans navigate these challenges and find the right partner.

Key #1: We're in it together

The path to effective cost management begins by acknowledging that payers need partners in order to succeed. From the beginning, an effective partner provides an equal return on time as well as investment.

Complex regulations require a partner that is nimble amid change and possesses the healthcare expertise to stay ahead. New regulations continually bring new requirements and considerations for health plans.

For example, the No Surprises Act is specifically challenging due to resource/staffing constraints and continual regulatory changes. Independent dispute resolution, which provides an opportunity for payers and providers to negotiate payments, will continue to become more complex.

Jon Grandstaff, GM and SVP of Payment Integrity at Zelis, shares three considerations to set the foundation for partnerships that are committed to proactive problem-solving and getting pricing, claims and payments right the first time.¹



Trustworthiness

A trustworthy partner has a sincere desire and intentionality to be a resource for clients when they have issues or needs. They take relationships with clients seriously and invest in deep consultative and collaborative experiences. Payers consider them to be a trusted adviser that can assist with new challenges over time.

Flexibility

Flexibility is crucial to adapting to changing payer environments. Flexible partners consider how to deliver savings now, but also keep an eye toward the future. They put solutions in place that help prepare for future needs and regulatory changes. Being flexible requires partners to integrate into the business and think beyond the immediate challenge. Look for partners who can integrate from culture, technology and engagement standpoints. A partner that prioritizes flexibility can drive alignment throughout a Blues organization.

Commitment

A committed partner invests in their clients and views them as partners for the long-haul. It takes time to nurture client relationships, but partners that make them a priority send a clear signal that they value the partnership and are dedicated to achieving success together.

Key #2: Holistic solutions

Blues plans recognize the importance of examining solutions that span the business and address multiple challenges at once. A holistic cost management solution touches all areas of the business and considers the needs of payers, providers and members equally. Effective platforms lower costs, minimize provider abrasion and enhance member experience. Solutions prioritize efficiency, reduce administrative burden and improve the

bottom line. In other words, they do more than just patch a problem.

This process starts by looking for a spectrum of solutions that are enabled by data across all areas of the business. Holistic solutions manage or assist in the continuum of the healthcare experience, from payers making intelligent decisions around their network, to evaluating cost of care, optimizing claim pricing, payment delivery and communicating with all stakeholders.



A holistic mindset indicates a platform that provides value across the entire comprehensive system of care.

- Eugene Hahn,
Senior Vice President,
Sales, Zelis

Key #3: Efficiency & accuracy

The right cost management partner delivers the healthcare experience that providers and patients deserve. This means they provide options that both sets of stakeholders want and need.²

Innovative technology is critical to effective cost management.³ And yet, it's a challenge to balance tech while streamlining workflows and enabling team members to focus on efficiency. A key to success is to use technology for claims routing and savings while using people to perform in-depth reviews to ensure accuracy. This is another difficult balance to achieve, so successful payers often rely on a partner that has the expertise to keep technology and processes streamlined, up to date and compliant with regulations.

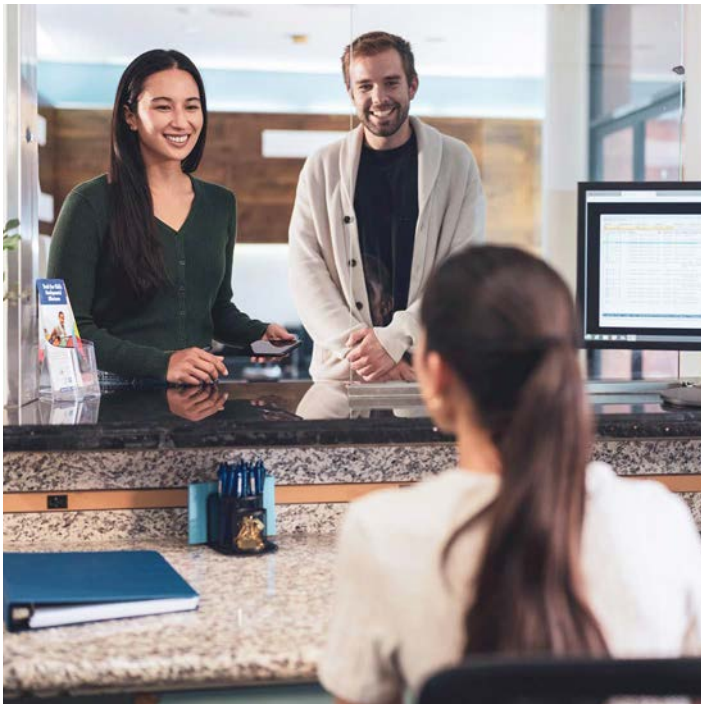
Another pain point is the timely receipt of medical records. This poses an ongoing challenge for health plans, but it is essential to review claims prior to payment. Payers can overcome this challenge by engaging the provider community to help build relationships and effectively collect medical records in a seamless, timely manner. One solution is to engage a cost management partner that can obtain appropriate documentation for claims on the payer's behalf. When this capability is

built into the claims review workflow, it can increase the efficiency of the review process.

Finally, expanding the claims editing process can help reduce errors. "Secondary editing of claims should be the industry standard for every payer," says Eugene Hahn, Vice President of Sales with Zelis. Payment integrity strategies could include adding more clinical editing in the day-to-day claims processing. "Advanced clinical editing is happening in the second pass, as well as the third and even fourth passes. This continues to expand year over year," states Hahn.

Similar strategies are emerging in clinical review areas such as prepayment itemized bill reviews, prepayment clinical reviews and prepayment diagnostic-related group (DRG) validations, which provides additional strategic value in the clinical editing space.

Cost management is not just about reducing the cost; it's about partners who provide education and solutions for standard operating procedures that will result in a faster payment process.



I think we all need to continue to put the values of payment integrity at the forefront to realize how many opportunities are being created every day to benefit members and providers.

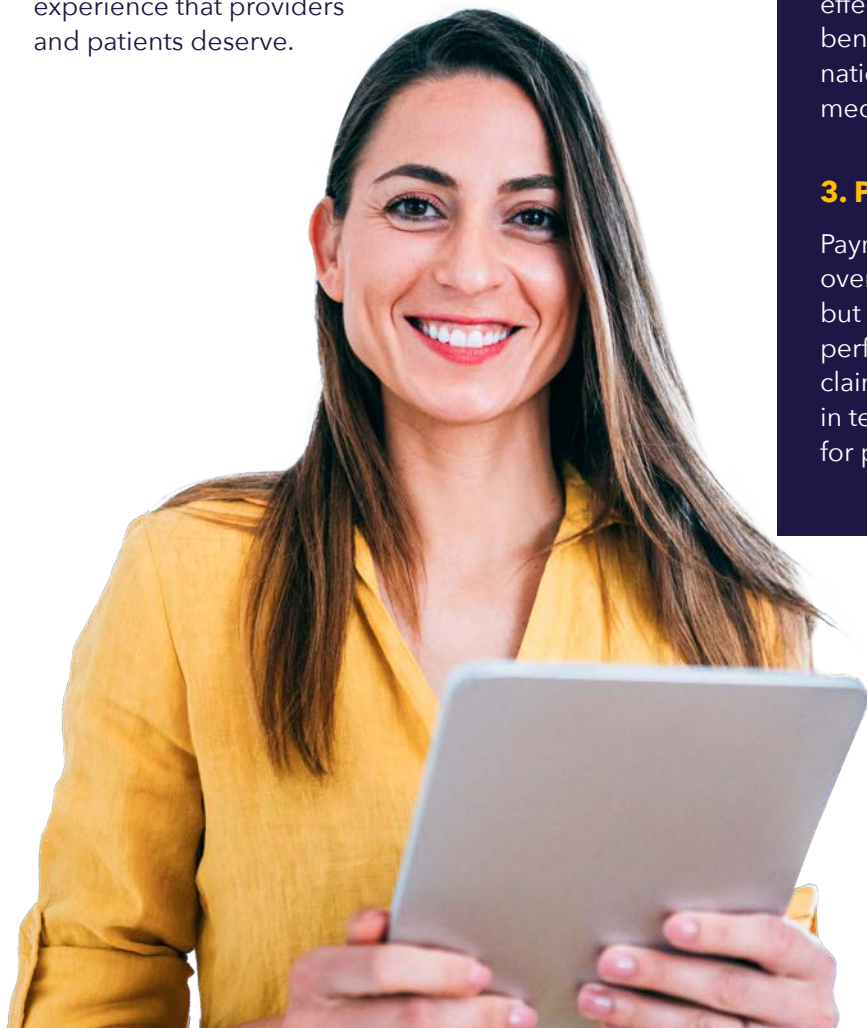
- **Eugene Hahn,**
Senior Vice President, Sales, Zelis

Solution: Fueling success with purposeful innovation

As payers seek to navigate these challenges, it's clear that success starts with data. Blues plans understand the importance of interoperability with cost management platforms, having published a vision for using data to empower patients and providers.⁴

Zelis' solutions align with this vision by easily integrating with external adjudication platforms and clients' proprietary systems.

Zelis is lowering costs in the healthcare system by addressing the claims, pricing and payment needs of Blues members and providers. When choosing a cost management partner, consider the importance of a partner that provides a return on time, brings a holistic mindset and can deliver an experience that providers and patients deserve.



1. Out of network claims and expert claims review

The industry is looking at numerous areas to help reduce claims spend. CPT codes are being reviewed strictly with OON claims. This is an area where having a flexible partner is essential. Zelis is leading the charge by offering claims-editing technologies that build out the most important claims faster than ever.

2. Pricing

Zelis can help with market-based pricing data on OON claims.

Zelis' technology fills in the missing data components. The platform fills data gaps and gives payers the information that they need to effectively manage costs. This is a substantial benefit to payers that do not have access to nationwide data or visibility into other state median in-network reimbursements.

3. Payment integrity

Payment integrity on OON claims is sometimes overlooked as an area to identify savings, but Blues plans can find hidden savings by performing payment integrity checks on OON claims every time. This delivers tangible benefits in terms of reduced costs and improved value for policyholders.

ABOUT ZELIS

Zelis is modernizing the healthcare financial experience by providing a connected platform that bridges the gaps and aligns interests across payers, providers, and healthcare consumers: the Zelis Advanced Payments Platform (ZAPP). Zelis sees across the healthcare system to identify, optimize, and solve problems holistically with technology built by healthcare experts - driving real, measurable results for clients.

Learn more at **zelis.com** and follow us on LinkedIn to get the latest news.

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