



# Verisk Provider Outreach Program

Reduce MSA costs on claims through more complete data



## Effective Cost Mitigation

### Our 2021 Results

#### CMS Submission Stats

Over \$5M Rebuttal Savings

#### Proactive Cost Mitigation

Nearly \$160M Total Estimated Savings

#### Amended Review / MSA 2nd Look Stats

Nearly \$15M Reduction in Allocations

#### Rx Outreach / Ongoing Case Monitoring

Nearly \$500K Reduction in MSA medication costs

## Build a cost-mitigation strategy

Effective MSA cost-mitigation strategies are critical to reducing Medicare Set-Aside (MSA) amounts and getting claims settled. Building your game plan involves understanding CMS's allocation process and what steps you can take to reduce allocation cost drivers and, where applicable, challenge CMS determinations. This requires holistic and proactive approaches – and the right partner to effectively coordinate all the moving parts.

For almost two decades, Verisk has partnered with the top insurers, self-insurers, and TPAs to reduce MSA allocations through advocacy, experience, and innovation – and our new **Provider Outreach Program** takes cost-mitigation to the next level while taking crucial, but time-consuming, tasks off the adjuster's desk.



## Our standard MSA cost-mitigation approach

### Strategies that lead the way to savings

As part of every MSA assignment, we automatically take a proactive and aggressive approach in evaluating treatment by leveraging our industry leading clinical and legal expertise to achieve savings through experience and advocacy.

### Essential functions of our team of nurses and attorneys:



- Review cost drivers and suggest cost reduction strategies for every MSA service



- Monitor medication price reductions and cross reference impacted medications from prior MSA allocations to identify additional cost mitigation opportunities



- Utilize CMS's re-review and Amended Review processes to help reduce WCMSAs and ensure CMS policies are applied consistently, accurately, and appropriately

### Take cost-mitigation to the next level and simplify the process

Building upon our industry leading cost mitigation approaches, we now offer two additional services as part of our Provider Outreach program: Record Acquisition and Cost Mitigation. We go directly to the claimant's provider(s) to obtain necessary records and/or other information to assist in reducing MSA cost drivers, helping you drive savings, promote consistent practices, and simplify the process for front-line claims handlers.



## Record Acquisition

### **Get the information you need for lower allocations and faster settlement**

Missing or stale medical records and pharmacy histories can prompt CMS to include superfluous treatment in an MSA. Gaps in treatment records can lead to a development letter and request for additional information to complete the MSA review. These issues can complicate and delay the settlement process—but they're avoidable.

Getting these records from care providers is key to reducing MSA allocation amounts and streamlining the MSA process, but many adjusters find this additional step of cost mitigation to be time-consuming and frustrating. Our new Record Acquisition services steps in to ensure that your cost-mitigation plans stay on track.

As part of our Record Acquisition service, we contact the claimant's treating provider(s) on your behalf to obtain missing or updated records, with follow-up requests made at two-week intervals to ensure this information is obtained. Once we have the records, they are then reviewed and analyzed by our program nurse specialists to determine the potential MSA impact and identify cost mitigation opportunities. We then provide the adjuster with a detailed analysis and action plan.



## Cost Mitigation

### Develop a comprehensive treatment picture for each claim

Sometimes simply obtaining missing or updated records isn't enough to move the dial and more intervention may be necessary to achieve savings and results. Cost Mitigation service is designed to take that next step by clarifying treatment recommendations and options with the treating physician to drive down MSA costs. As part of our outreach, we contact the claimant's treating medical provider(s) to obtain necessary information or clarification regarding the claimant's treatment, recommended or referenced treatment options, and other information which may be helpful in providing a more accurate assessment of the claimant's current treatment plan and reducing identified MSA cost drivers.

As examples, through this service we will contact the claimant's treating provider(s), as may be applicable, to obtain clarification on any number of "prescription triggers" such as whether a noted prescription is no longer needed, being filled, or go be prescribed PRN; whether a prescription brand medication can be converted to generic or OTC; possible form or dosage changes; clarifying the purpose of a prescribed medication; and whether alternative medications may be appropriate. Other examples may include:

- clarification of costly Durable Medical Equipment (DME), Medical Supplies or Prosthetics
- clarification of costly devices such as Spinal Cord Stimulators (SCS) or Intrathecal (IT) Pumps





## Ensure a complete MSA cost-mitigation strategy with Verisk's specialty services

Get missing or updated records and total treatment recommendation reviews to achieve the lowest allocations for each claim. Contact us today to learn about Provider Outreach services.

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