



# MEDICAL BILL REVIEW

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## DESCRIPTION OF SERVICE

A critical cost-containment service that ensures employers and payers only pay what's appropriate – no more, no less. Our 100% human touch bill review process audits every incoming provider bill for accuracy, compliance, and savings opportunities, ensuring that every line item checks out – from verifying that the provider is approved to treat, to checking the detail of medical reports to substantiate each CPT code before repricing and processing other discounts.

## STUDIES/STATISTICS

- Average Percent of Savings: 76.27% from fee schedule
- Average ROI on non-duplicate bills: 12.41 to 1
- Average Turnaround Time for standard bills: 2.5 days
- Average Turnaround time for complex bills, facility bills, and negotiation bills: 7 days
- Reduction in rates of appeal, reconsideration requests, and IMR: 40%

## MEDEX HIGHLIGHTS & DIFFERENTIATORS

- 100% of reviews audited for accuracy and maximized savings
- One-stop efficient processing including standard bill reviews, specialty reviews, EDI enhanced capabilities, e-billing, check writing options, user-friendly adjuster portal, real-time updates, and reports for program transparency and strategic decisionmaking.
- Customized fee structure and process options
- Experienced negotiators step in for non-OMFS-covered, high-dollar complex bills, and second review requests to leverage our network provider relationships, resulting in maximum savings and final resolution
- In-house medical, legal, and Workers' Compensation process expertise for complex bills
- Optional seamless integration with our powerful independent provider networks, medical case management, and UR yields maximum savings

