



High Dollar Bill Review and Negotiation

A large percentage of high dollar claims have inappropriate charges relating to level of care, unbundling, experimental/investigational therapies, medical never events (serious, largely preventable medical events) and other billing errors. Therefore, even with exceptional case management efforts and contractual rates, high dollar billed charges should be reviewed to ensure only eligible charges are considered for payment. At PartnerRe validating appropriate reimbursement is part of the due diligence we offer to mitigate your risk.

Program Features

- Provides a complimentary preliminary review to determine whether a full review is warranted
- Provides oversight of the entire review process through sign-off, settlement or case closure
- Analyzes all high dollar charges to determine whether the billing chronology mirrors the patient's clinical condition
- Determines if the billed charges are consistent with medical billing standards and plan design
- Available for both in network or out of network charges
- Addresses charges in excess of industry-accepted reasonable/customary norms
- Looks for unbundling or redundant charges
- Uncovers therapies that are considered experimental under the plan design
- Uncovers duplicate or non-applicable charges billed in error
- Help preserve the payer-provider relationship
- Uncovers medical costs attributable to an adverse or never event

Contact your **PULSE + Plus™** Clinical Consultant to see how this Program can work for you.



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