Delivering Uncommon Success with Claims

Stop Loss carriers are meant to pay claims. That's what we're here to do. And at HM Insurance Group (HM), we underwrite our business with that in mind. We also see the frequent challenges that high-dollar claims cause in today's market, and our focus is on helping to contain those costs. Understanding the unique requirements of our self-funded clients plays a big role in our ability to provide the financial protection they need.

Take a look at three situations and the solutions and results that we've achieved.

1. Million Dollar Babies



SITUATION: Twins were born prematurely, amassing total claim charges in excess of **\$2 million**. The infants were covered under the self-funded plan of a private college that also had HM Stop Loss protection in place. Considering the extremely high-dollar nature of NICU claims, it was imperative that they be paid quickly in order to help protect the financial stability of the group.



SOLUTION: The claims team at HM understood the need for a swift turnaround for the group facing this scenario, so they worked very closely with the broker and the TPA to gather the necessary information to review and approve claim payment as promptly as possible. Strong relationships with producer and TPA partners are essential to our ability to move things along quickly because the lines of communication are open and everyone is kept on the same page. Through the efforts of all involved, HM was able to deliver reimbursements of **more than \$2 million in four business days**.



2. No Way ... But How?



SITUATION: A **\$1 million claim** with a 40% discount off billed charges was received from a hospital in the Southeast. Concerned that the cost was still too high, the TPA contacted the hospital's revenue cycle manager to express concern over the charges in an attempt to reduce them further and was told to contact the hospital's CFO with a request of this nature.

The TPA felt that success with this option would be a challenge that would result in three potential outcomes: (1) the CFO would decline the request as going beyond the already negotiated contractual agreement; (2) the CFO would state that the agreement was already in violation because the claim had not been paid within 30 days; or (3) the CFO would decline to even address the issue. In this case, the CFO declined to address the issue.



SOLUTION: The TPA contacted HM, and we remitted the case to one of our cost containment vendors. **Strong relationships with well-vetted vendors** help to drive our ability to achieve savings. In this case, our vendor successfully reduced the bill, netting a **savings of \$78,000 (7.8%) in about a week**. The TPA was surprised by the success, as achieving such a positive outcome can be difficult in the current market.





3. Can You Do It? Yes We Can!



SITUATION: An educational trust on the East Coast had a unique situation in which their medical coverage was to be handled out of the Intermediate Unit (since they prepay their medical premium each year), and drug coverage was to be handled separately through each member school and then later reconciled. Many Stop Loss carriers were unable to handle the reimbursement process with medical reimbursements going back to the trust and pharmaceutical reimbursements going to each participating district, so finding the right Stop Loss coverage was a challenge.



SOLUTION: HM Insurance Group assessed the situation, developed a plan and implemented a reconciliation process that provides reimbursements throughout the plan year to the appropriate party with little or no work on the broker or trust. Keeping the payments separate allows other schools to join the pharmaceutical consortium for better overall discounts, and there is quicker reimbursement since payment doesn't have to go through the Intermediate Unit.



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