

Claims Audit & Recovery Services

A powerful new solution for customers with Benefitplace™ Health Insights



Improperly paid claims are a major contributor to wasteful health care spending in the U.S. Over 20 percent of all medical claims contain errors, resulting in billions of dollars in overpayments each year.¹

To help self-funded employers minimize the negative impact of this problem on their bottom line (and their employees), Benefitfocus is proud to offer Claims Audit & Recovery Services as an extension of our Health Insights data analytics platform.

At no additional fee to activate, we'll review previously paid medical claims to ensure they were billed, priced and paid appropriately. Then, we'll recover any improperly paid amounts directly from the providers on behalf of the employer health plan.



Comprehensive Review

Whereas other payment integrity solutions draw conclusions from a small data set, we review every claim the employer health plan has paid.



Independent & Unbiased

Benefitfocus avoids the conflicts of interest that plague the health care system. Our sole focus is working on behalf of employer health plans and their members.



Money Back to Members

In addition to identifying plan overpayments, we'll also identify member overpayments to help put money back in their pockets.



Smooth & Simple

There is no fee to activate this service and, because the necessary data is already coming through Health Insights, getting started is a breeze.²

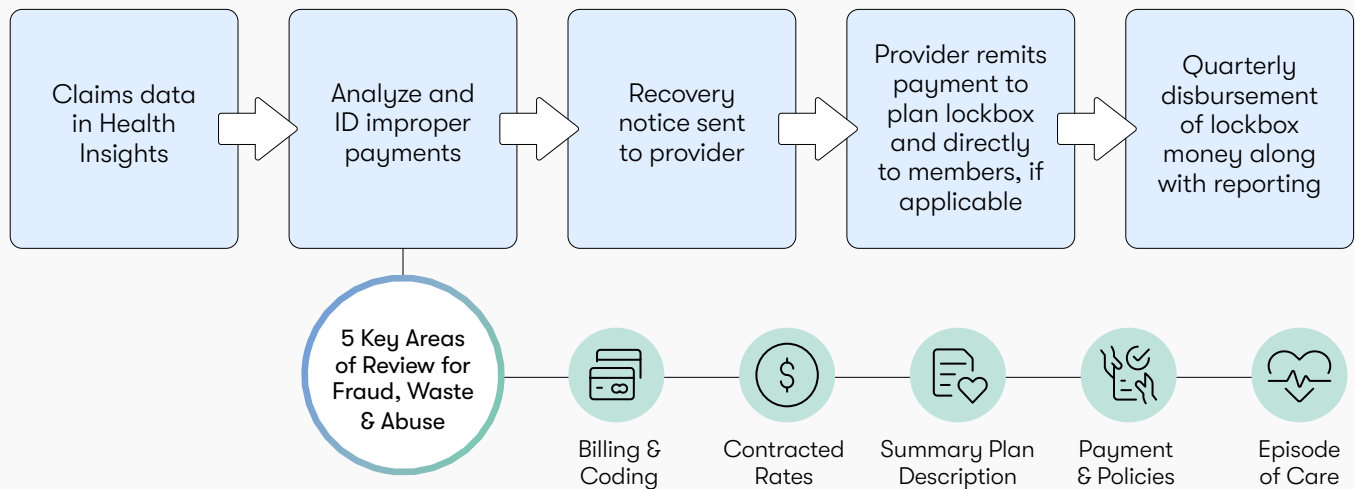
1. American Medical Association: Health Insurer Report Card

2. Benefitfocus will take a percentage of recovered amounts to cover administrative costs. As part of implementation, customers may need to provide additional documentation and sign agreements to authorize review and recovery of claims.

Health care costs too much as it is.

Our Claims Audit & Recovery Services take back health care dollars that should never have been spent in the first place.

How It Works



- ✓ **600+** proprietary algorithms
- ✓ **3-15%** error ID rate (5x industry average)
- ✓ **95%** provider acceptance of findings
- ✓ **70%** recovery of overpayments (3x industry average)
- ✓ **8-12 weeks** to first receipt of refund

Example Recovery Opportunity

- 7,000-member plan
 - \$51.7M claims paid in one year
 - \$1.6M overpayments (conservative 3%)
- ✓ **\$1.1M total recovered (70% of overpayments)³**

Ready to learn more?

Contact customersales@benefitfocus.com or reach out to your Health Insights customer success manager!

3. In example scenario, employer plan would receive total recovered amount less the percentage to Benefitfocus and any amount that is owed by the provider to members.