



# **Year End Renewal and Bidding: Opportunities for Greater Control and Savings**

Presenter:

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***Pioneering Specialists in***

***Group Health Care***

***Post-Payment Administration***

***For Over 25 Years***

**Customer Philosophy**

**Respect** for Existing Procedures

**Emphasis** on Customization

**FOCUS** on Solutions

## Year End

- **Plan year-end is the time when self-funded employers, trustees, and fiduciaries can exert the most control and get the changes they want.**
- **All too often, however, this opportunity is missed entirely, ignored, or used by plan administrators to limit fiduciary control.**

## Year End

To see year end power, consider three scenarios:

1. Awaiting renewal decision
2. Renewal decision made
3. Decision ignored or delegated

# Year End Scenario #1

- Pending Competitive Bid decision
  - 8/2010: Restoring Competition to the Self-funded Market
  - 7/2011: Do's and Don'ts of Competitive Bidding
  
- Pending Contract Renewal
  - 6/2010: Administrative Performance Contracts
  - 1/2012: The Road to 100% Transparency

# Year End Scenario #2

## Decision Made

- Test extent of control
  - 3/2012: Health Data: Plan Control Starts Here
  
- Have a plan to take control
  - 1/2010: Year-end Auditing
  - 1/2011: Planning for (Next Year)

# Year End Scenario #3

## Decision Ignored or Delegated

- 5/2012: How to Reduce Health Plan Costs without Changing Coverage: The Five Levers of Management Control
- 8/2012: Are You Ready to Mänge Your Health Plan Costs?

## What to do next?

### Baseline Enrollment Audit

- 7/2007: It all starts with enrollment
- 9/2010: Complete Enrollment: The Source of Cost Control
- 9/2011: Enrollment Validation
- 10/2009: Dependent Eligibility Auditing: Best Practices
- 10/2012: The 5 Things an Effective Dependent Audit Should Include

### Baseline Claim Audit

- 5/2011: 24 Reasons Why Claim Payment Error Occurs
- 12/2009: Waste, Abuse and Fraud
- 9/2007: Claim Recovery Yachtsmanship
- 10/2011: Provider Fraud
- 11/2010: Provider Scorecard
- 8/2007: Making Medicare Pay
- 3/2010: Managing Medicare Cost Shifting

## What to do then?

**AT A MINIMUM, continue annual audits.**

**To go beyond minimum fiduciary control:**

- **Decide what you want to accomplish.**
  - Management oversight
  - Control of plan

10/2010: Post-Payment Administration: The Missing Link in Health Plan Management and Control
- **Determine what Base Audits are showing.**
  - Little or no actionable findings
  - Substantial findings with collection cooperation
  - Substantial findings with collection resistance and filing limits

11/2011: Collecting Claim Overpayments  
6/2010: Administrative Performance Contracts

# What is Best for Your Plan?

		What do you want to accomplish?		
		Fiduciary Compliance	Management Oversight	Plan Control
What did you find from prior audits?	Little or no actionable findings	Annual claim audits and enrollment audits		
	Substantial findings with collection cooperation and limited filing limit impact		Data and reporting controlled by TPA Quarterly or semi-annual updates on issue areas Annual claim audits and enrollment audits	
	Substantial findings with collection resistance and significant filing limit impact		Data Controlled by Plan Routine Performance Monitoring Using Plan-defined Administrative Performance Standards  Monthly data assessments Quarterly/Semi-annual updates Annual claim audits and enrollment audits	

# Past Webinars Available

Recordings of past webinars are available upon request, including:

- October 2012 – The 5 Most Important Things an Effective Dependent Audit Should Include
- September 2012 - Old Question, New Twist: Is Self-funding Right for Your Group Health Plan?
- August 2012 - Are You Ready to Manage Your Health Plan Costs?
- June 2012 - Group Health Brokers' Future: Disintermediation or Re-intermediation
- May 2012 – Five Levers of Management Control
- April 2012 – How the AMA Can Help You with Plan Oversight
- March 2012 – Health Data Control
- February 2012 – Health Reform: A Contrarian's Perspective
- January 2012 – The Road to 100% Transparency
- December 2011 – 2012: What Does it Hold for Self-funded Health Plans?
- November 2011 – Overpayment Collection
- October 2011 – Finding Provider Fraud

For more information, please visit [Si's Library](#)

## For More Information Contact

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