

JOURNEY CLAIMS MANAGEMENT

**BEST TIME TO PROCURE:
UPON MATCHING WITH
GESTATIONAL CARRIER**



FINANCIAL & INSURANCE SOLUTIONS

We take the burden off of you to solve insurance and provider issues that can arise for maternity and/or newborn claims. Often, correcting errors months after bills and claims are processed will only delay financial completion of the journey. With Claims Management in place, you have the ART Risk team vetting all claims to ensure there is no unnecessary overpayment for medical care.

PERSONALIZED ASSISTANCE



Review of all insurance claims and provider bills to determine the correct payment needed from the IPs, Agency, or escrow account.

FINANCIAL CHECKS AND BALANCES



Routine communication with the insurance carrier(s) and providers to rectify denied claims, Coordination of Benefits issues, and incorrect coding. It is our responsibility to check for accuracy and confirm insurance is paying according to maximum plan benefits.

REPORT OF CLAIMS AND BILLS



Zero balances are requested from all providers and a final report is delivered to appropriate parties once all claims and bills are processed at the conclusion of the journey. You can rest assured there are no unpaid bills.

Over the course of a year, clients have been saved just shy of \$1.5M with ART Risk Solutions' claims management services.

1 866 433 4999

www.artrisksolutions.com






LIC# 0H38016



**CALL TODAY!
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Did you know: customarily, agencies pay provider bills without checking for accuracy of processed insurance claims and provider bills? Our Claims Management Specialists solve the issues that repeatedly fall on the Intended Parents and Gestational Carriers.

REPEATED INSURANCE PROBLEMS	OUR SOLUTIONS
INCORRECT CODING FROM PROVIDERS	 Communicate with all providers to correct coding issues and resubmit claims to insurance carrier.
HMO MEDICAL GROUP ISSUES	 Coordinate with GC, insurance, and providers to appoint the correct medical group.
EMERGENCIES PROCESSED AS OUT-OF-NETWORK	 Dispute the out-of-network claims and have claims reprocessed as in-network.
INSURANCE PAYMENTS NOT APPLIED TO PROVIDER BILLS	 Work with the providers to revise the bills to the correct amount due.
NEWBORN CLAIMS ON THE GC'S INSURANCE POLICY	 Work with the GC, insurance, and providers to remove claims and apply to the correct insurance plan.

\$500 additional fee (per policy) will be added to above pricing if more than two policies.



Gestational Carrier Local Monitoring
\$500
Service finished upon completion of cycle.



Maternity Claims Management
\$1750
Service completed 8-12 months post-birth (on average).



Newborn Claims Management
\$500
Service is complete upon discharge from the hospital and after the 1st well care visit.

Cancellation Policies:

If confirmation of pregnancy has occurred and Maternity and/or Newborn Claims Management is cancelled due to miscarriage, ART Risk Solutions will evaluate refund/credit dependent on work rendered for current journey, less a \$250 administrative fee. There will be no refunds upon birth of child. Maternity Claims Management service is complete when agency contract ends with the Gestational Carrier and/or final Claims Management Report is submitted to Agency/Intended Parent(s).